

# **RCRA FACILITY INVESTIGATION REPORT**

## **VOLUME II of III**

Prepared For

**Encycle/Texas, Inc., Corpus  
Christi, Texas**

August 13, 2002

 **ARCADIS**

## APPENDICES



## APPENDIX B

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-33**

Lat. **27**    **48**    **35**    Long. **97**    **27**    **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/26/00**  
  
Completed **6/26/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	.2	<b>Tan SAND</b>
.2	10	<b>Tan, silty clay</b>
10	13	<b>Tan/orange CLAY</b>
13	15	<b>Brown SAND to SILTY SAND</b>
15	16	<b>Brown CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **1**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**

Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    N/A  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    N/A  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    N/A  
Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

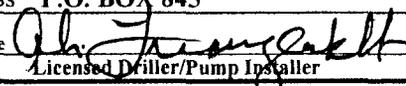
**15) Water Test**

Typetest  Pump     Bailer     Jetted     Estimated    N/A  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

<b>12) Packers</b>	Type	Depth
N/A		

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature 	Date <b>6/17/02</b>	Signature _____	Date <b>6/17/02</b>
Licensed Driller/Pump Installer		Apprentice	

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
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 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
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This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** **5) N↑**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-34</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	Lat. _____ Long. _____ Grid # <b>83-13-4</b>
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<b>6) Drilling Date</b> Started <u>6/26/01</u> Completed <u>6/26/01</u>	<b>Diameter of Hole</b> <table border="1" style="width:100%"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2.5</td> <td align="center">SURFACE</td> <td align="center">16.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	16.0	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
Dia. (in)	From (ft)	To (ft)						
2.5	SURFACE	16.0						

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion										
0	0.3	Tan, SAND	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>										
0.3	8.2	Tan, SILTY CLAY TO CLAY	If Gravel Packed give the Interval from _____ ft. to _____ Ft.										
8.2	9.5	Tan, SILT	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>										
9.5	11	Orange CLAY	<table border="1" style="width:100%"> <tr> <th>Dia. (in.)</th> <th>New Or Used</th> <th>Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial</th> <th>Setting (ft) From To</th> <th>Gage Casing Screen</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial	Setting (ft) From To	Gage Casing Screen					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial		Setting (ft) From To	Gage Casing Screen								
11	16	Brown SILT											

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 5  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

Typetest  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**12) Packers**    Type \_\_\_\_\_ Depth \_\_\_\_\_

N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address P.O. BOX 845    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature Alfredo Palacios    Date 6/23/01    Signature \_\_\_\_\_    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Attention Owner:  
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**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-35**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 6/13/00  
Completed 6/13/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	1	Mix of shells & clay
1	3	Tan silty clay
3	3.5	Tan sand
3.5	8	Tan silty clay
8	11	Tan clay
11	12.5	Lt. brown silty clay
12.5	14.3	Brown silty sand
14.3	16.5	Brown clayey silt
16.5	18	Brown silt
18	20	Tan/brown sand

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other PLUGGED  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from 0 ft. to 20.0 ft. # of sacks used 6  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By ALFREDO PALACIOS

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

**Typetest**     Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?

Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /  

Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**

Lic. No. **5036-M**

Address **P.O. BOX 845**

City **FRIENDSWOOD**

State **TX**

Zip **77549**

Signature *Alfredo Palacios* /23/01  
Licensed Driller/Pump Installer    Date

Signature \_\_\_\_\_ / /  
Apprentice    Date

**OWNER**

Attention Owner:  
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and filed with the department  
and owner within 60 days  
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**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b>	<b>Long.</b>	<b>Grid # 83-13-4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-36</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5) N↑</b>
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<b>6) Drilling Date</b> Started <u>6/13/00</u> Completed <u>6/13/00</u>	<b>Diameter of Hole</b> <table border="1" style="width:100%"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2.5</td> <td align="center">SURFACE</td> <td align="center">16.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	16.0	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
Dia. (in)	From (ft)	To (ft)						
2.5	SURFACE	16.0						

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	4	Mix of shells & clay/ tan/brown sandy silt	If Gravel Packed give the Interval from _____ ft. to _____ ft. <b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>
4	11.5	Brown silty sand to sand	
11.5	16	Gray sand	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

<b>9) Cementing Data</b> Cementing from <u>0</u> ft. to <u>16.0</u> ft. # of sacks used <u>6</u> _____ ft. to _____ ft. # of sacks used _____ Method Used <u>TREMIE</u> Cementing By <u>ALFREDO PALACIOS</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
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<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1" style="width:100%"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used											<b>10) Surface Completion</b> <u>N/A</u> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used												

<b>14) Typepump</b> <u>N/A</u> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____	<b>11) Water Level</b> Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____
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<b>15) Water Test</b> <u>N/A</u> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>12) Packers</b> Type    Depth <u>N/A</u>
---	--

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x <b>NO</b> If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Date <u>1/23/01</u>	Signature _____ Apprentice	Date ____/____/____

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#### 3) Type of Work

New Well     Deepening  
 Reconditioning  
**B-37**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

4) Proposed Use (check)     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

5) **N↑**

#### 6) Drilling Date

Started **6/13/00**  
Completed **6/13/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>15.0</b>

7) Drilling Method (check)     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>2</b>	<b>Mix of shells &amp; clay</b>
<b>2</b>	<b>5</b>	<b>Tan clay</b>
<b>5</b>	<b>7</b>	<b>Tan silty clay</b>
<b>7</b>	<b>9</b>	<b>Tan clay</b>
<b>9</b>	<b>12</b>	<b>Tan silt to sandy silt</b>
<b>12</b>	<b>14</b>	<b>Tan sand</b>
<b>14</b>	<b>15</b>	<b>Tan clay</b>

8) Borehole Completion     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

#### 13) Plugged

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
Sacks used \_\_\_\_\_

#### 9) Cementing Data

Cementing from **0** ft. to **15.0** ft. # of sacks used **6**  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

#### 14) Typepump

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_    **N/A**  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

#### 10) Surface Completion

Specified Surface Slab Installed    **N/A**  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

#### 15) Water Test

Type test  Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

#### 11) Water Level

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

#### 16) Water Quality

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

#### 12) Packers

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**  
Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**  
Signature *Alfredo Palacios*    Date **6/13/01**    Signature \_\_\_\_\_    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Licensed Driller/Pump Installer    Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-38**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 6/13/00

Completed 6/13/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	17.0

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored

Air Hammer     Cable Tool     Jetted

Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	4.1	Mix of shells & clay/ brown & black silty clay
4.1	9	Tan/orange silty clay
9	10	Tan sand
10	12	Gray silt
12	20	Mix of tan & gray sand

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other PLUGGED

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 17.0 ft. # of sacks used 7  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By ALFREDO PALACIOS

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    N/A

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_    N/A

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

Type test  Pump     Bailer     Jetted     Estimated    N/A

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?

Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<u>N/A</u>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**

Lic. No. **5036-M**

Address **P.O. BOX 845**

City **FRIENDSWOOD**

State **TX**

Zip **77549**

Signature *Alfredo Palacios*    Date 6/23/01  
 Licensed Driller/Pump Installer

Signature \_\_\_\_\_    Date \_\_\_\_\_  
 Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-39</b>	4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
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6) Drilling Date Started <b>6/13/00</b> Completed <b>6/13/00</b>	Diameter of Hole			7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>	

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	1.5	Tan silty clay	If Gravel Packed give the Interval from _____ ft. to _____ ft.
1.5	3.6	Drk. brown silty clay	
3.6	-8	Tan silty clay	Casing, Blank Pipe, and Well Screen Data <b>N/A</b>
8	11.5	Tan sandy silt	
11.5	17	Tan sand	Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From To    Gage Casing Screen
17	17.3	Tan, clay	
17.3	20	Tan, sand	

9) Cementing Data  
Cementing from **0** ft. to **20.0** ft. # of sacks used **7**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

13) Plugged  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
Sacks used \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

14) Typepump **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

15) Water Test **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

16) Water Quality  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

10) Surface Completion **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

11) Water Level  
Static level \_\_\_\_\_ ft. below Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

12) Packers

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **6/23/01** Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Licensed Driller/Pump Installer Apprentice

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

1) OWNER					A. WELL IDENTIFICATION AND LOCATION DATA								
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>		City <b>Corpus Christi</b>		State <b>TX</b>		Zip					
2) WELL LOCATION													
County <b>NUECES</b>		Physical Address <b>5300 Up River Road</b>		City <b>Corpus Christi</b>		State <b>TX</b>		Zip					
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-40</b>		Lat.		Long.		Grid # <b>83-13-4</b>							
		4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No					5)		N↑				
6) Drilling Date Started <b>6/13/00</b> Completed <b>6/13/00</b>		Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2.5    SURFACE    20.0</b>			7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>								
From (ft)    To (ft)    Description and color of formation material		8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the Interval from _____ ft. to _____ ft.			Casing, Blank Pipe, and Well Screen Data <b>N/A</b>								
<b>0    8    Caliche &amp; clay, white caliche w/brown clay</b>					Dia. (in.)		New Or Used		Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft) From    To		Gage Casing Screen
<b>8    11.7    Tan sandy silt</b>													
<b>11.7    16.6    Tan sand</b>													
<b>16.6    17    Tan clay</b>													
<b>17    20    Tan sand</b>													
					9) Cementing Data Cementing from <b>0</b> ft. to <b>20.0</b> ft. # of sacks used <b>7</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____								
(Use reverse side of Well Owner's copy, If necessary)													
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>													
Casing left in well: _____    Cement/Bentonite placed in well: _____													
From (ft)		To (ft)		From (ft)		To (ft)		Sacks used					
14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____													
Depth to pump bowls, cylinder, jet, etc., _____ ft.													
15) Water Test <b>N/A</b> Type/test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.													
16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x <b>NO</b> If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No													
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>					Lic. No. <b>5036-M</b>								
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>		State <b>TX</b>		Zip <b>77549</b>							
Signature <i>Alfredo Palacios</i>		Date <b>6/23/01</b>		Signature _____		Date _____		Date _____					
Licensed Driller/Pump Installer				Apprentice									

TDLR FORM 004VWWD  
**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-41**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/19/00**

Completed **6/19/00**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
-----------	-----------	---------

<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>
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**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Black, silty clay</b>
<b>1</b>	<b>10</b>	<b>Brown silt</b>
<b>10</b>	<b>16</b>	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

**Type test**     Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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Water Well Driller/Pump Installer Program  
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This form must be completed  
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upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-42**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/19/00**

Completed **6/19/00**

**Diameter of Hole**

Dia. (in)    From (ft)    To (ft)

**2.5    SURFACE    16.0**

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>10</b>	<b>Brown silty clay</b>
<b>10</b>	<b>11.8</b>	<b>Black silty clay</b>
<b>11.8</b>	<b>16</b>	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

**N/A**

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-43**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)**    N↑

**6) Drilling Date**

Started 6/19/00  
  
Completed 6/19/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Brown, clay</b>
<b>1</b>	<b>2.2</b>	<b>Brown silty clay</b>
<b>2.2</b>	<b>4.4</b>	<b>Tan/brown sand</b>
<b>4.4</b>	<b>8.5</b>	<b>Tan silty clay</b>
<b>8.5</b>	<b>12</b>	<b>Tan silty sand</b>
<b>12</b>	<b>20</b>	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**9) Cementing Data**

Cementing from 0 ft. to 20.0 ft. # of sacks used 6  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIÉ**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**

**Typetest**     Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Date <b>1/23/01</b>	Signature _____ Apprentice	Date _____

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

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Email address: water.well@license.state.tx.us

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and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-44</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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**6) Drilling Date**

Started <b>6/15/00</b>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven
Completed <b>6/15/00</b>	Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored
	<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>	<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted
				<input checked="" type="checkbox"/> Other <b>Direct Push</b>

From (ft)	To (ft)	Description and color of formation material
0	12	<b>Brown sandy silt</b>
12	16	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **10**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    **N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth  
**N/A**

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature	Date
Licensed Driller/Pump Installer		Apprentice	Date

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

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Email address: water.well@license.state.tx.us

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and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 6/15/00  
Completed 6/15/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	16.0

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	10	Tan sandy silt
10	13	Tan silty sand
13	16	Tan sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 10  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used TREMIE

Cementing By ALFREDO PALACIOS  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date / /  
Artesian Flow \_\_\_\_\_ gpm.    Date / /

**15) Water Test**

Type test  Pump     Bailer     Jetted     Estimated    N/A  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<u>N/A</u>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <u>6/23/01</u>	Signature _____	Date <u>/ /</u>
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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Tel: free (800) 803-9202  
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and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-46**

Lat.	Long.	Grid # <b>83-13-4</b>
<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**6) Drilling Date**

Started **6/22/00**  
  
Completed **6/22/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>18.0</b>

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>8.9</b>	<b>Brown/tan silty clay</b>
<b>8.9</b>	<b>11</b>	<b>Tan silty sand</b>
<b>11</b>	<b>18</b>	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.  
**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **18.0** ft. # of sacks used **8**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**

**13) Plugged**

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/28/01</b>	Signature _____	Date <b>/ /</b>
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-47**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 6/22/00  
  
Completed 6/22/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>12.0</b>

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>8.9</b>	<b>Brown/tan silty clay</b>
<b>8.9</b>	<b>11</b>	<b>Tan silty sand</b>
<b>11</b>	<b>12</b>	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
Cementing from 0 ft. to 12.0 ft. # of sacks used 6  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**    **N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth  
**N/A**

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Signature _____ Apprentice	Date _____	Date _____

TDLR FORM 004WWD  
**OWNER**

Copies to TDLR - Owner - Driller/Pump Installer

Form provided by Forms On-A-Disk, Inc. ( Dallas, Texas ( (214) 340-9429





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upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-50</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor_ <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
--	--	---------------------

**6) Drilling Date**

Started <b>6/15/00</b>	<b>Diameter of Hole</b> Dia. (in)    From (ft)    To (ft)			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
Completed <b>6/15/00</b>	<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>	

From (ft)	To (ft)	Description and color of formation material
0	1.3	Brown silty clay w/ shells
1.3	11.5	Tan silty clay
11.5	14	Tan silt to clayey silt w/ sand lenses
14	16	Orange silty clay

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
 If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Pert., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
 Cementing from 0 ft. to 16.0 ft. # of sacks used 10  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **ALFREDO PALACIOS**  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**  
 Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**    **N/A**  
 Type test  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

<b>N/A</b>		
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**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/15/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat.	Long.	Grid # <b>83 - 13 - 4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
---	---	--------------

<b>6) Drilling Date</b> Started <u>6/15/00</u>  Completed <u>6/15/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	16.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>		
0	1	Drk. brown clay w/ shells	If Gravel Packed give the Interval from _____ ft. to _____ Ft.		
1	1.4	Tan sand	<b>Casing, Blank Pipe, and Well Screen Data</b> N/A		
1.4	10	Brown silty clay	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial
10	12.5	Orange clay	Setting (ft)	From	To
12.5	15	Brown silt			
15	16	Tan silty clay			

(Use reverse side of Well Owner's copy, If necessary)	<b>9) Cementing Data</b>
	Cementing from <u>0</u> ft. to <u>16.0</u> ft. # of sacks used <u>10</u> Method Used <u>TREMIE</u> Cementing By <u>ALFREDO PALACIOS</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours    N/A Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						<b>10) Surface Completion</b> N/A <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> N/A <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>11) Water Level</b> Static level _____ ft. below    Date / / Artesian Flow _____ gpm.    Date / /
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<b>15) Water Test</b> N/A Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>12) Packers</b> Type    Depth N/A
--	---

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <u>6/15/01</u>	Signature _____	Date / /
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
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 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat.	Long.	Grid # <b>83 - 13 - 4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-52</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
--	---	---------------------

<b>6) Drilling Date</b> Started <u>6/15/00</u> Completed <u>6/15/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	16.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall					
0	2.3	Brown mix of sand, silt, clay & shells	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the Interval from _____ ft. to _____ Ft.					
2.3	9	Brown silty clay	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>					
9	14.5	Orange clay	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From	To	Gage Casing Screen
14.5	15.5	Brown silt, minor sand						
15.5	16	Orange silty clay						

<b>9) Cementing Data</b>	
Cementing from <u>0</u> ft. to <u>16.0</u> ft. # of sacks used <u>10</u>	
_____ ft. to _____ ft. # of sacks used _____	
Method Used <u>TREMIE</u>	
Cementing By <u>ALFREDO PALACIOS</u>	
Distance to septic system field or other concentrated contamination _____ ft.	
Method of verification of above distance _____	

(Use reverse side of Well Owner's copy, if necessary)

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						<b>10) Surface Completion</b> <u>N/A</u> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> <u>N/A</u> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____	<b>11) Water Level</b> Static level _____ ft. below    Date <u>  /  /  </u> Artesian Flow _____ gpm.    Date <u>  /  /  </u>
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<b>15) Water Test</b> <u>N/A</u> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>12) Packers</b> Type _____    Depth _____ <u>N/A</u>
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<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/3/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**Texas Department of License and Regulation**  
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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-53</b>	Lat.	Long.	Grid # <b>83-14-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
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6) Drilling Date Started <b>6/22/00</b> Completed <b>6/22/00</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>		
	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 18.0</b>		

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	1	Tan clay to silty clay	If Gravel Packed give the interval from _____ ft. to _____ Ft. <b>Casing, Blank Pipe, and Well Screen Data N/A</b> Dia. (in.) New Or Used Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial Setting (ft) From To Gage Casing Screen
1	5	Brown silty clay	
5	10.7	Tan silty clay	
10.7	11.5	Tan clayey silt	
11.5	12	Tan sandy silt	
12	16.4	Tan sand	
16.4	18	Orange sand	

9) Cementing Data Cementing from <b>0</b> ft. to <b>18.0</b> ft. # of sacks used <b>8</b> ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
--

13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____ Cement/Bentonite placed in well: _____	10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____	11) Water Level Static level _____ ft. below Date ____/____/____ Artesian Flow _____ gpm. Date ____/____/____
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15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	12) Packers Type Depth <b>N/A</b>
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16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
---

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name **Encycle** Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**2) WELL LOCATION**

County **Nueces** Physical Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**3) Type of Work**

New Well  Deepening  
 Reconditioning  
**B-54**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**5) N↑**

**6) Drilling Date**

Started **6/22/00**  
Completed **6/22/00**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>15.0</b>

**7) Drilling Method (check)**  Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>4</b>	<b>Tan silty clay</b>
<b>4</b>	<b>7</b>	<b>Gray to black silty clay</b>
<b>7</b>	<b>10.2</b>	<b>Brown silty clay</b>
<b>10.2</b>	<b>12</b>	<b>Tan/brown silty sand</b>
<b>12</b>	<b>15</b>	<b>Tan sand</b>

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data** **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**  Well plugged within 48 hours **N/A**

Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** **N/A**  
Type test  Pump  Bailor  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

**9) Cementing Data**  
Cementing from **0** ft. to **15.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
Static level \_\_\_\_\_ ft. below Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm. Date **/ /**

**12) Packers** Type \_\_\_\_\_ Depth \_\_\_\_\_  
**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature **Alfredo Palacios** Date **6/23/01** Signature \_\_\_\_\_ Date **/ /**  
Licensed Driller/Pump Installer \_\_\_\_\_ Apprentice \_\_\_\_\_

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upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-55</b>	4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	Lat. _____ Long. _____	Grid # <b>83 - 13 - 4</b>
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6) Drilling Date Started <u>7/10/00</u> Completed <u>7/10/00</u>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>	5) <b>N↑</b>
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From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>	
0	3	Tan silty clay	If Gravel Packed give the interval from _____ ft. to _____ ft.	
3	7	Tan sand	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>	
7	8	Brown silty clay	Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From    To    Gage Casing Screen	
8	15	Tan sand		

From (ft)	To (ft)	Description and color of formation material	9) Cementing Data	
0	3	Tan silty clay	Cementing from <u>0</u> ft. to <u>15.0</u> ft. # of sacks used <u>3</u>	
3	7	Tan sand	ft. to _____ ft. # of sacks used _____	
7	8	Brown silty clay	Method Used <u>TREMIE</u>	
8	15	Tan sand	Cementing By <u>ALFREDO PALACIOS</u>	

(Use reverse side of Well Owner's copy, If necessary)

13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>	Casing left in well: _____	Cement/Bentonite placed in well: _____	Distance to septic system field or other concentrated contamination _____ ft.	
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

14) Typepump <b>N/A</b>	10) Surface Completion <b>N/A</b>
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder	<input type="checkbox"/> Specified Surface Slab Installed
<input type="checkbox"/> Other _____	<input type="checkbox"/> Specified Surface Sleeve Installed
Depth to pump bowls, cylinder, jet, etc., _____ ft.	<input type="checkbox"/> Pitless Adapter Used
15) Water Test <b>N/A</b>	<input type="checkbox"/> Approved Alternative Procedure Used
Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated	11) Water Level
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	Static level _____ ft. below    Date ____/____/____
16) Water Quality	Artesian Flow _____ gpm.    Date ____/____/____

Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	12) Packers    Type    Depth
	<b>N/A</b>

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>
State <b>TX</b>	Zip <b>77549</b>

Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Date <u>1/23/01</u>	Signature _____ Apprentice	Date _____
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**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-56**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic    **5)**    **N↑**  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**6) Drilling Date**

Started 6/28/00  
Completed 6/28/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	0.8	Tan/orange/brown clay
0.8	8.3	Tan silty clay
8.3	10.7	Tan silt
10.7	16	Tan sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
Cementing from 0 ft. to 16.0 ft. # of sacks used 6  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth

<b>N/A</b>		
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Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**  
Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**  
Signature *Alfredo Palacios*    Date **3/01**    Signature \_\_\_\_\_    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Licensed Driller/Pump Installer    Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** **Lat.** **Long.** **Grid # 83.13.4**

New Well  Deepening  Reconditioning **B-57**

**4) Proposed Use (check)** -  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
 If Public Supply well, were plans submitted to the TNRCC?  Yes  No

<b>6) Drilling Date</b> Started <b>6/19/00</b>  Completed <b>6/19/00</b>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	8.2	<b>Brown/tan SILTY CLAY</b>	If Gravel Packed give the Interval from _____ ft. to _____ ft.
8.2	12	<b>Tan SILTY SAND</b>	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>
12	16	<b>Tan, SAND</b>	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 3  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
 Cementing By **ALFREDO PALACIOS**  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** **N/A**

Typetest  Pump  Bailer  Jetted  Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?  Yes  No

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
 Static level \_\_\_\_\_ ft. below \_\_\_\_\_ Date    /    /     
 Artesian Flow \_\_\_\_\_ gpm. Date    /    /   

**12) Packers** Type      Depth  
**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**

Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**

Signature *Alfredo Palacios* Date **6/23/01** Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Licensed Driller/Pump Installer Apprentice

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-6616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name **Encycle** Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**2) WELL LOCATION**

County **NUECES** Physical Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**3) Type of Work** Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

New Well  Deepening  Reconditioning **B-58**  
**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**6) Drilling Date** Started **6/19/00** Completed **6/19/00**  
**7) Drilling Method (check)**  Driven  Air Rotary  Mud Rotary  Bored  Air Hammer  Cable Tool  Jetted  Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	1	Tan sandy silt
1	7	Brown silty clay
7	16	Tan sand, minor silt

Diameter of Hole		Setting (ft)		Gage Casing Screen
Dia. (in)	From (ft)	From	To	
2.5	SURFACE			

**8) Borehole Completion**  Open Hole  Straight Wall  Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**Casing, Blank Pipe, and Well Screen Data** **N/A**

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **6**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
Static level \_\_\_\_\_ ft. below Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm. Date **/ /**

**12) Packers** Type \_\_\_\_\_ Depth \_\_\_\_\_  
**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**

Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **6/23/01** Signature \_\_\_\_\_ Date \_\_\_\_\_  
Licensed Driller/Pump Installer \_\_\_\_\_ Apprentice \_\_\_\_\_

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us  
**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-59**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)**    **N↑**

**6) Drilling Date**

Started **6/19/00**  
  
Completed **6/19/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Tan sandy silt</b>
<b>1</b>	<b>7</b>	<b>Brown silty clay</b>
<b>7</b>	<b>15.5</b>	<b>Tan silt</b>
<b>15.5</b>	<b>16</b>	<b>Brown sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_    **N/A**  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**

**Typetest**     Pump     Bailor     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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Water Well Driller/Pump Installer Program  
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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-60**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/19/00**  
  
Completed **6/19/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>12.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>7.6</b>	<b>Tan/brown silty clay</b>
<b>7.6</b>	<b>12</b>	<b>Tan silty sand to sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A	
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	
			From	To		

**9) Cementing Data**

Cementing from **0** ft. to **12.0** ft. # of sacks used **6**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**

Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**    **N/A**

Typetest     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_

<b>N/A</b>
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Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
in reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** **Lat.** **Long.** **Grid # 83 - 13 - 4**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-61, B-62, &amp; B-63</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5) N↑</b>
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**6) Drilling Date** **7) Drilling Method (check)**

Started <u>6/20/00</u>  Completed <u>6/20/00</u>	<b>Diameter of Hole</b> <table border="1" style="width:100%"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2.5</td> <td align="center">SURFACE</td> <td align="center">16.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	16.0	<input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
Dia. (in)	From (ft)	To (ft)						
2.5	SURFACE	16.0						

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data** N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 5  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**10) Surface Completion** N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers** Type    Depth

N/A		
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**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump** N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** N/A

**Typetest**     Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature <b>Apprentice</b>	Date <b>  /  /  </b>

**OWNER**





Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-68**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

Grid # **83-13-4**  
**5) N↑**

**6) Drilling Date**

Started **6/27/00**  
  
Completed **6/27/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	16.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	8.3	<b>Brown silty clay</b>
8.3	15	<b>Orange clay</b>
15	15.7	<b>Tan silt</b>
15.7	16	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **2**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**

Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**    **N/A**  
**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

<b>N/A</b>		

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/27/01</b>	Signature _____	Date <b>/ /</b>	Date _____
Licensed Driller/Pump Installer		Apprentice		Date

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-69**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 6/15/00  
Completed 6/15/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	16.0

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	3	Brown/tan silty sand
3	11	Brown silty clay
11	15.6	Orange clay
15.6	16	Tan silty to sandy silt

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other PLUGGED  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**

Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		Sacks used
From (ft)	To (ft)	From (ft)	To (ft)	

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 10  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used TREMIE  
Cementing By ALFREDO PALACIOS  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    N/A  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

Pump     Bailer     Jetted     Estimated    N/A

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**

Type	Depth
<u>N/A</u>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

1) OWNER					A. WELL IDENTIFICATION AND LOCATION DATA				
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>		City <b>Corpus Christi</b>		State <b>TX</b>		Zip	
2) WELL LOCATION									
County <b>NUECES</b>		Physical Address <b>5300 Up River Road</b>		City <b>Corpus Christi</b>		State <b>TX</b>		Zip	
3) Type of Work		Lat.		Long.		Grid # <b>83-13-4</b>			
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-70</b></p>		4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No				5)		N↑	
6) Drilling Date		Diameter of Hole			7) Drilling Method (check)				
Started <b>6/19/00</b>		Dia. (in)    From (ft)    To (ft)			<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>				
Completed <b>6/19/00</b>		<b>2.5    SURFACE    12.0</b>							
From (ft)		To (ft)		Description and color of formation material					
<b>0</b>		<b>7.6</b>		<b>Tan silty clay</b>					
<b>7.6</b>		<b>8.1</b>		<b>Tan sand w/minor silt</b>					
<b>8.1</b>		<b>10</b>		<b>Tan clayey silt</b>					
<b>10</b>		<b>12</b>		<b>Tan silt w/minor sand</b>					
8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the Interval from _____ ft. to _____ ft.					Casing, Blank Pipe, and Well Screen Data <b>N/A</b>				
Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From    To    Gage Casing Screen									
9) Cementing Data									
Cementing from <b>0</b> ft. to <b>12.0</b> ft. # of sacks used <b>6</b>									
Method Used <b>TREMIE</b>									
Cementing By <b>ALFREDO PALACIOS</b>									
Distance to septic system field or other concentrated contamination _____ ft.									
Method of verification of above distance _____									
10) Surface Completion <b>N/A</b>									
<input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used									
11) Water Level									
Static level _____ ft. below    Date <b>/ /</b>									
Artesian Flow _____ gpm.    Date <b>/ /</b>									
12) Packers    Type    Depth									
<b>N/A</b>									
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>									
Casing left in well: _____    Cement/Bentonite placed in well: _____									
From (ft)		To (ft)		From (ft)		To (ft)		Sacks used	
14) Typepump <b>N/A</b>									
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____									
Depth to pump bowls, cylinder, jet, etc., _____ ft.									
15) Water Test <b>N/A</b>									
Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated									
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.									
16) Water Quality									
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x <b>NO</b> If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>						Lic. No. <b>5036-M</b>			
Address <b>P.O. BOX 845</b>			City <b>FRIENDSWOOD</b>			State <b>TX</b>		Zip <b>77549</b>	
Signature <i>Alfredo Palacios</i>		Date <b>6/23/01</b>		Signature _____		Date _____		Date _____	
Licensed Driller/Pump Installer		Apprentice							

**OWNER**

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-71</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
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6) Drilling Date Started <b>6/14/00</b> Completed <b>6/14/00</b>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 24.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
--	--	---

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	0.5	Mix of brown orange clay, silty & sand	If Gravel Packed give the interval from _____ ft. to _____ Ft. <b>Casing, Blank Pipe, and Well Screen Data N/A</b>
0.5	8	Brown to tan silty clay	
8	10	Tan clay	
10	14.5	Tan silty clay	
14.5	15.3	Tan silt to clayey silt	
15.3	16	Tan/orange clay	
16	16.8	Tan sand	
16.8	22.5	Orange/tan clay	
22.5	24	Tan sand	

9) Cementing Data Cementing from <b>0</b> ft. to <b>24.0</b> ft. # of sacks used <b>10</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
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13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____ Cement/Bentonite placed in well: _____ From (ft) To (ft) From (ft) To (ft) Sacks used	10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc. _____ ft.	11) Water Level Static level _____ ft. below Date ____/____/____ Artesian Flow _____ gpm. Date ____/____/____
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15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	12) Packers Type _____ Depth _____ <b>N/A</b>
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16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
---

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alberto Palacios</i> Date <b>6/23/01</b>	Signature _____ Date ____/____/____
Licensed Driller/Pump Installer	Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-72**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
 If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Started <u>6/14/00</u>	Dia. (in)	From (ft)	
Completed <u>6/14/00</u>	<u>2.5</u>	<u>SURFACE</u>	<u>24.0</u>	

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion
0	3.2	Yellowish silty sand	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
3.2	8	Brown silty clay	If Gravel Packed give the Interval from _____ ft. to _____ Ft.
8	10	Tan silty sand	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>
10	17	Orange clay	Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From To    Gage Casing Screen
17	18	Tan silty	
18	24	Orange clay	

**9) Cementing Data**

Cementing from 0 ft. to 24.0 ft. # of sacks used 10  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

Typetest  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type    Depth

N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address P.O. BOX 845    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature Alfredo Palacios    Date 6/23/01    Signature \_\_\_\_\_    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Licensed Driller/Pump Installer    Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-73</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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**6) Drilling Date**

Started <u>7/11/00</u>  Completed <u>7/11/00</u>	<b>Diameter of Hole</b> <table border="1"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2.5</td> <td align="center">SURFACE</td> <td align="center">26.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	26.0	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
Dia. (in)	From (ft)	To (ft)						
2.5	SURFACE	26.0						

From (ft)	To (ft)	Description and color of formation material
0	1.2	Tan silty sand
1.2	8	Brown silty clay
8	10.3	Brown/tan sand w/ minor silt
10.3	20.5	Orange clay
20.5	22	Brown silty sand
22	26	Orange clay

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED  
 If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, if necessary)

**13) Plugged**

Well plugged within 48 hours    **N/A**  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from 0 ft. to 26.0 ft. # of sacks used 3  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**

**Typestest**     Pump     Bailer     Jetted     Estimated    **N/A**  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Date <u>7/28/01</u>	Signature _____ Apprentice	Date <u>  /  /  </u>

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-74</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5)    N↑
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6) Drilling Date Started <b>6/14/00</b> Completed <b>6/14/00</b>	Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2.5    SURFACE    24.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
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From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	2.5	Tan brown silty sand	If Gravel Packed give the interval from _____ ft. to _____ Ft. <b>Casing, Blank Pipe, and Well Screen Data    N/A</b>
2.5	9	Tan silty clay	
9	9.8	Brown silty clayey silt	
9.8	20.5	Tan clay with mirror silt	
20.5	22.5	Tan clayey silt with mirror sand	
22.5	24	Orange clay	

9) Cementing Data Cementing from <b>0</b> ft. to <b>24.0</b> ft. # of sacks used <b>10</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b>
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13) Plugged <input type="checkbox"/> Well plugged within 48 hours    N/A Casing left in well: _____    Cement/Bentonite placed in well: _____ Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
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14) Typepump    N/A <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	10) Surface Completion    N/A <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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15) Water Test    N/A Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	11) Water Level Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____
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16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	12) Packers    Type    Depth N/A
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Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Date <b>6/15/01</b>	Signature _____    Date _____
Licensed Driller/Pump Installer	Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
*Water Well Driller/Pump Installer Program*  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-75</b>	Lat.	Long.	Grid # <b>89-13-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
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6) Drilling Date Started <b>6/26/00</b> Completed <b>6/26/00</b>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 28.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
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From (ft)	To (ft)	Description and color of formation material
0	8	Tan brown SILTY SAND
8	26	Orange CLAY
26	28	Brown SILT

8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the Interval from _____ ft. to _____ Ft.	Casing, Blank Pipe, and Well Screen Data <b>N/A</b>
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9) Cementing Data Cementing from <b>0</b> ft. to <b>28.0</b> ft. # of sacks used <b>11</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
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13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____ Cement/Bentonite placed in well: _____ From (ft) To (ft) From (ft) To (ft) Sacks used	10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	11) Water Level Static level _____ ft. below Date / / Artesian Flow _____ gpm. Date / /
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15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	12) Packers Type Depth <b>N/A</b>
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16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
---

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> / Date <b>6/25/01</b>	Signature _____ / Date _____
Licensed Driller/Pump Installer	Apprentice

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
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Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-76</b>	Lat.	Long.	Grid # <b>83-13-4</b>	5) <b>N↑</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	
--	--

6) Drilling Date Started <b>6/26/00</b> Completed <b>6/26/00</b>	Diameter of Hole			7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	<b>2.5</b>	<b>SURFACE</b>	<b>24.0</b>	

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	1	Mix of tan/brown SILT, CLAY & SAND	If Gravel Packed give the interval from _____ ft. to _____ Ft. Casing, Blank Pipe, and Well Screen Data <b>N/A</b>
1	3	Drk. brown CLAY	
-3	8	Tan/brown SILTY CLAY	
8	23.4	Tan/orange CLAY	
23.4	24	Brown SILT	

9) Cementing Data Cementing from <b>0</b> ft. to <b>24.0</b> ft. # of sacks used <b>11</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
---

13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____ Cement/Bentonite placed in well: _____ Sacks used _____	10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	11) Water Level Static level _____ ft. below Date <b>/ /</b> Artesian Flow _____ gpm. Date <b>/ /</b>
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15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	12) Packers Type _____ Depth _____ <b>N/A</b>
--	--

16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x <b>NO</b> If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Date <b>7/23/01</b>	Signature _____ Date _____
Licensed Driller/Pump Installer	Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-77</b>	4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>83.13.4</b> N↑
---	--	----------------------

6) Drilling Date Started <b>6/27/00</b> Completed <b>6/27/00</b>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 20.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
--	--	---

From (ft)	To (ft)	Description and color of formation material
0	9	Brown/tan silty clay
9	19.7	Orange clay
19.7	20	Tan sand

8) Borehole Completion  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

9) Cementing Data  
Cementing from **0** ft. to **20.0** ft. # of sacks used **3**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**

13) Plugged  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

10) Surface Completion **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

14) Typepump **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

11) Water Level  
Static level \_\_\_\_\_ ft. below Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm. Date **/ /**

15) Water Test **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

12) Packers

Type	Depth
<b>N/A</b>	

16) Water Quality  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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Water Well Driller/Pump Installer Program  
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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well -  Deepening  
 Reconditioning  
**B-78**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

5) **N↑**

**6) Drilling Date**

Started 6/27/00  
Completed 6/27/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>

**7) Drilling Method (check)**  Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Tan sand</b>
<b>1</b>	<b>15.7</b>	<b>Gray silty clay</b>
<b>15.7</b>	<b>18.5</b>	<b>Orange clay</b>
<b>18.5</b>	<b>20</b>	<b>Tan silt</b>

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A	
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	
			From	To		

**9) Cementing Data**  
Cementing from 0 ft. to 20.0 ft. # of sacks used 3  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft) To (ft) From (ft) To (ft) Sacks used

--	--	--	--	--

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine  Jet  Submersible  Cylinder **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below Date    /    /     
Artesian Flow \_\_\_\_\_ gpm. Date    /    /   

**15) Water Test**

Pump  Bailer  Jetted  Estimated **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

<b>12) Packers</b>	Type	Depth
<b>N/A</b>		

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <u>  </u> / <u>  </u> / <u>  </u>	Signature <b>Apprentice</b>	Date <u>  </u> / <u>  </u> / <u>  </u>

**OWNER**

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
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Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

**3) Type of Work** **5) Grid # 83-13-4**

New Well     Deepening     Reconditioning    **B-79**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b> Started <u>6/21/00</u>  Completed <u>6/21/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	<b>2.5</b>	<b>SURFACE</b>	<b>21.0</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>																																
0	1	<b>Drk. brown silty clay</b>	If Gravel Packed give the Interval from _____ ft. to _____ ft.																																
1	11	<b>Tan/gray silty clay</b>	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>																																
11	12	<b>Brown/orange clay</b>	<table border="1" style="width:100%"> <tr> <th rowspan="2">Dia. (in.)</th> <th rowspan="2">New Or Used</th> <th rowspan="2">Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial</th> <th colspan="2">Setting (ft)</th> <th rowspan="2">Gage Casing Screen</th> </tr> <tr> <th>From</th> <th>To</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	From	To																								
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial					Setting (ft)			Gage Casing Screen																									
				From	To																														
12	12.5	<b>Tan silt</b>																																	
12.5	18	<b>Orange clay</b>																																	
18	18.5	<b>Tan orange sandy silt</b>																																	
18.5	21	<b>Orange clay</b>																																	

**9) Cementing Data**

Cementing from 0 ft. to 21.0 ft. # of sacks used 8

\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By ALFREDO PALACIOS

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder

Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

**Typetest**     Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed

Specified Surface Sleeve Installed

Pitless Adapter Used

Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /  

Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_

N/A

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. Box 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>[Signature]</i>	Date <b>3/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

1) OWNER										A. WELL IDENTIFICATION AND LOCATION DATA									
Name <b>Encycle</b>					Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip		
2) WELL LOCATION																			
County <b>NUECES</b>					Physical Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip		
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-80</b>					4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No					5) <b>NT</b>					Grid # <b>83-13-4</b>				
6) Drilling Date Started <b>6/21/00</b> Completed <b>6/21/00</b>					Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2.5    SURFACE    21.0</b>					7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>									
From (ft)    To (ft)    Description and color of formation material					8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>														
<b>0    1    Drk. brown silty clay</b>					If Gravel Packed give the Interval from _____ ft. to _____ ft.														
<b>1    11    Tan/gray silty clay</b>					<b>Casing, Blank Pipe, and Well Screen Data    N/A</b>														
<b>11    15    Orange clay</b>					Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From    To    Gage Casing Screen														
<b>15    15.3    Tan silt</b>																			
<b>15.3    17.5    Orange clay</b>																			
<b>17.5    18    Tan silt</b>																			
(Use reverse side of Well Owner's copy, If necessary)										9) Cementing Data Cementing from <b>0</b> ft. to <b>18.0</b> ft. # of sacks used <b>8</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____									
13) Plugged <input type="checkbox"/> Well plugged within 48 hours    N/A Casing left in well: _____    Cement/Bentonite placed in well: _____										10) Surface Completion    N/A <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used									
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used					14) Typepump    N/A <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.					11) Water Level Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____					12) Packers    Type    Depth <b>N/A</b>				
15) Water Test    N/A Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.										16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>										Lic. No. <b>5036-M</b>									
Address <b>P.O. BOX 845</b>					City <b>FRIENDSWOOD</b>					State <b>TX</b>		Zip <b>77549</b>							
Signature <i>Alfredo Palacios</i>					Date <b>1/23/01</b>					Signature _____					Date ____/____/____				
Licensed Driller/Pump Installer					Apprentice														

**OWNER**

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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-81**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)**    **Grid #** **83-13-4**    **N1**

**6) Drilling Date**

Started 6/21/00  
  
Completed 6/21/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	21.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	10	Gray, drk. brown silty clay
10	20.5	Orange/tan clay
20.7	21	Tan sandy silt

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg, if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
Cementing from 0 ft. to 21.0 ft. # of sacks used 9  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**

**Typetest**     Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	<b>N/A</b>

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date <u>  /  /  </u>
Licensed Driller/Pump Installer		Apprentice	

TDLR FORM 004-WWD  
**OWNER**





Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-84</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
--	---	---------------------

<b>6) Drilling Date</b> Started <u>6/27/00</u>  Completed <u>6/27/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	24.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall										
0	3	<b>Brown silty clay</b>	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>										
3	5	<b>Green silty and silty clay</b>	If Gravel Packed give the Interval from _____ ft. to _____ ft.										
5	8	<b>Tan/orange silty clay</b>	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>										
8	23.8	<b>Orange clay</b>	<table border="1"> <tr> <th>Dia. (in.)</th> <th>New Or Used</th> <th>Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial</th> <th>Setting (ft) From To</th> <th>Gage Casing Screen</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft) From To	Gage Casing Screen								
23.8	24	<b>Brown silt, clayey silt</b>											

<b>9) Cementing Data</b>	
Cementing from <u>0</u> ft. to <u>24.0</u> ft. # of sacks used <u>3</u>	
Method Used <u>TREMIÉ</u>	
Cementing By <u>ALFREDO PALACIOS</u>	
Distance to septic system field or other concentrated contamination _____ ft.	
Method of verification of above distance _____	

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						(Use reverse side of Well Owner's copy, if necessary)
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>10) Surface Completion</b> <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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<b>15) Water Test</b> <b>N/A</b> Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>11) Water Level</b> Static level _____ ft. below    Date <u>  /  /  </u> Artesian Flow _____ gpm.    Date <u>  /  /  </u>
--	--

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type    Depth <b>N/A</b>
---	--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <u>6/3/01</u>	Signature _____	Date <u>  /  /  </u>
Licensed Driller/Pump Installer		Apprentice	

**TDLR FORM 004-WWD**  
**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-85**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/22/00**

Completed **6/22/00**

**Diameter of Hole**

Dia. (in)    From (ft)    To (ft)

**2.5    SURFACE    18.0**

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	6	Brown silty clay
6	11.8	Tan silty clay
11.8	14.1	Orange clay
14.1	18	Tan silty sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **18.0** ft. # of sacks used **8**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>	
Signature <i>Alfredo Palacios</i>	Date <b>6/22/01</b>	Signature _____	Date ____/____/____	
Licensed Driller/Pump Installer		Apprentice		Date

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-86**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)**    **N↑**

**6) Drilling Date**

Started <b>6/28/00</b>	<b>Diameter of Hole</b>		
	Dia. (in)	From (ft)	To (ft)
	<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>
Completed <b>6/28/00</b>			

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	5	Drk. brown/black gray silty clay
5	11.5	Tan silty clay
11.5	14.7	Orange clay
14.7	20	Tan silty sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **20.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
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**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

- New Well     Deepening  
 Reconditioning  
**B-87**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

- 4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/22/00**  
Completed **6/22/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>18.0</b>

**7) Drilling Method (check)**     Driven

- Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Drk. brown clay</b>
<b>1</b>	<b>6.3</b>	<b>Brown silty clay</b>
<b>6.3</b>	<b>13</b>	<b>Tan silty clay</b>
<b>13</b>	<b>18</b>	<b>Tan silty sand</b>

- 8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **18.0** ft. # of sacks used **8**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

- Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

- Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

- Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**

Type test  Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. Box 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date <b>/ /</b>
Licensed Driller/Pump Installer		Apprentice	

TDLR FORM 004WWD  
**OWNER**

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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-88**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/28/00**  
Completed **6/28/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	20.0

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	3	Drk. brown silty clay
3	8.5	Tan silty clay
8.5	16.1	Orange clay
16.1	20	Tan silty sand to sand

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Cage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **20.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type \_\_\_\_\_ Depth \_\_\_\_\_

Type	Depth
N/A	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Alfredo Palacios*    Date **6/23/01**    Signature \_\_\_\_\_    Date \_\_\_\_\_  
Licensed Driller/Pump Installer    Apprentice    Date



Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat.	Long.	Grid # <b>83 - 13 - 4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-89</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
--	---	--------------

<b>6) Drilling Date</b> Started <u>7/10/00</u>  Completed <u>7/10/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	17.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>	
0	0.5	Drk. brown silty clay	If Gravel Packed give the interval from _____ ft. to _____ ft.	
0.5	2	Brown clayey silt	<b>Casing, Blank Pipe, and Well Screen Data</b> N/A	
2	12.7	Brown silty clay	Dia. (in.)	New Or Used
12.7	14	Orange clay	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To
14	17	Brown silty sand		Gage Casing Screen

**9) Cementing Data**

Cementing from 0 ft. to 17.0 ft. # of sacks used 3  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **ALFREDO PALACIOS**  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours    N/A										
Casing left in well: _____    Cement/Bentonite placed in well: _____										
<table border="1"> <thead> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used					
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						

<b>14) Typepump</b> N/A <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____	<b>10) Surface Completion</b> N/A <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
---	--

<b>15) Water Test</b> N/A Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>11) Water Level</b> Static level _____ ft. below    Date / / Artesian Flow _____ gpm.    Date / /
--	--

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes    x NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type    Depth _____ N/A
---	--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Signature _____ Apprentice
Date <u>11/23/01</u>	Date / /

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

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Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-90**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **7/10/00**  
  
Completed **7/10/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>0.5</b>	<b>Drk. brown silty clay</b>
<b>0.5</b>	<b>11</b>	<b>Gray silty clay</b>
<b>11</b>	<b>12</b>	<b>Gray green sandy silt</b>
<b>12</b>	<b>15</b>	<b>Tan/green clay, blocky</b>
<b>15</b>	<b>20</b>	<b>Tan/green silt</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft) To (ft) From (ft) To (ft) Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **20.0** ft. # of sacks used **3**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, If necessary)

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc.. \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**    **N/A**  
Typetest  Pump     Bailor     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

Type	Depth
<b>N/A</b>	

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>7/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** Lat. 27 48 35 Long. 97 27 18 Grid #

New Well     Deepening  
 Reconditioning    **B-91**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
 If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b> Started <u>7/10/00</u>  Completed <u>7/10/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted * Other <u>Direct Push</u>	<b>5)</b> N↑
	Dia. (in)	From (ft)	To (ft)		
	<u>2</u>	<u>SURFACE</u>	<u>17.0</u>		

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
<u>0</u>	<u>1</u>	<u>Drk. brown SILTY CLAY</u>	If Gravel Packed give the interval from _____ ft. to _____ ft.
<u>1</u>	<u>16</u>	<u>Brown SILTYCLAY</u>	
<u>16</u>	<u>17</u>	<u>Tan SANDY SILT</u>	

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Cage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
 Cementing from 0 ft. to 17.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By CALISTRO CAMPOZANO  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A  
 Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes X NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    N/A  
 Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers**    Type    Depth  
 N/A

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>4997-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfred...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b> Signature _____    Date <b>6/17/02</b> Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

<b>1) OWNER</b>					<b>A. WELL IDENTIFICATION AND LOCATION DATA</b>					
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>		State <b>TX</b>	Zip		
<b>2) WELL LOCATION</b>										
County <b>NUECES</b>		Physical Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>		State <b>TX</b>	Zip		
<b>3) Type of Work</b>		Lat.		Long.		Grid # <b>83-13-4</b>				
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-92</b></p>		<b>4) Proposed Use (check)</b>				<b>5)</b>				
		<input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No				N↑				
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b>					
Started <u>6/29/00</u>		Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>					
Completed <u>6/29/00</u>		2.5	SURFACE	16.0						
From (ft)		To (ft)	Description and color of formation material							
0		11.8	Tan silty clay							
11.8		13	Orange clay							
13		16	Tan silty sand							
<b>8) Borehole Completion</b>					<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the Interval from _____ ft. to _____ ft.					
					<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>					
	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft)		From	To	Gage Casing Screen	
<b>9) Cementing Data</b>										
Cementing from <u>0</u> ft. to <u>16.0</u> ft. # of sacks used <u>5</u>										
					ft. to _____ ft. # of sacks used _____					
Method Used <u>TREMIE</u>										
Cementing By <u>ALFREDO PALACIOS</u>										
Distance to septic system field or other concentrated contamination _____ ft.										
Method of verification of above distance _____										
<b>13) Plugged</b>										
<input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well _____    Cement/Bentonite placed in well:										
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						
<b>14) Typepump</b>										
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <b>N/A</b> <input type="checkbox"/> Other _____										
Depth to pump bowls, cylinder, jet, etc., _____ ft.										
<b>15) Water Test</b>										
Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated <b>N/A</b> Yield: _____ gpm with _____ ft. drawdown after _____ hrs.										
<b>16) Water Quality</b>										
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x <b>NO</b> If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No										
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>5036-M</b>			
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>		State <b>TX</b>	Zip <b>77549</b>			
Signature <i>Alfredo Palacios</i>				Date <u>6/29/01</u>		Signature _____		Date _____		
Licensed Driller/Pump Installer				Apprentice		Date				

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-93**

Lat.	Long.	Grid # <b>83.13.4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**6) Drilling Date**

Started **6/27/00**  
Completed **6/27/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	0.5	Mix of rock, sand, clay
0.5	13	Tan silty clay
13	15.5	Orange clay
15.5	16	Tan, silty sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **2**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		Sacks used
From (ft)	To (ft)	From (ft)	To (ft)	

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

**Type test**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**12) Packers**    Type    Depth

<b>N/A</b>		
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Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 645</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Date <b>6/30/01</b>	Signature _____ Apprentice	Date _____

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-94**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 2/27/00

Completed 2/27/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
-----------	-----------	---------

2	SURFACE	16.0
---	---------	------

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored

Air Hammer     Cable Tool     Jetted

Other Direct Push

From (ft)	To (ft)	Description and color of formation material
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0	.2	<b>Tan SAND</b>
.2	11.7	<b>Tan, silty clay</b>
11.7	13.2	<b>Brown SILT</b>
13.2	16	<b>Orange CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other PLUGGED

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 1

\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By CALISTRO CAMPOZANO

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    N/A

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    N/A

Other \_\_\_\_\_

**15) Water Test**

**Typetest**     Pump     Bailer     Jetted     Estimated    N/A

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?

Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed

Specified Surface Sleeve Installed

Pitless Adapter Used

Approved Alternative Procedure Used

**11) Water Level**    N/A

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**

Type \_\_\_\_\_    Depth \_\_\_\_\_

N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**

Lic. No. **4997-M**

Address **P.O. BOX 845**

City **FRIENDSWOOD**

State **TX**

Zip **77549**

Signature *Alv...*  
Licensed Driller/Pump Installer

6/17/02  
Date

Signature \_\_\_\_\_  
Apprentice

6/17/02  
Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat.	Long.	Grid # <b>83.13.4</b>
------------------------	------	-------	-----------------------

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-95</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
--	---	--------------

<b>6) Drilling Date</b> Started <u>6/23/00</u>  Completed <u>6/23/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	15.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	3.7	Dark brown SILTY CLAY	If Gravel Packed give the Interval from _____ ft. to _____ ft.
3.7	12	Brown SILTY CLAY	
12	14.3	Orange CLAY	<b>Casing, Blank Pipe, and Well Screen Data</b> N/A
14.3	15	Tan SILT	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
 Cementing from 0 ft. to 15.0 ft. # of sacks used 5  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A  
 Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
 Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

12) Packers	Type	Depth
N/A		

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**  
 Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**  
 Signature *Alfredo Palacios*    Date **1/23/01**    Signature \_\_\_\_\_    Date \_\_\_\_\_  
 Licensed Driller/Pump Installer    Apprentice    Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-96**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83 - 13 - 4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/12/00**  
Completed **6/12/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1.5</b>	<b>Mix of debris, clay, sand, silt, loose, red, tan Black, green</b>
<b>1.5</b>	<b>8.3</b>	<b>Tan clay</b>
<b>8.3</b>	<b>13</b>	<b>Tan, sand</b>
<b>13</b>	<b>14.5</b>	<b>Tan to brown silt</b>
<b>14.5</b>	<b>20</b>	<b>Tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **20.0** ft. # of sacks used **10**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_    **N/A**  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**

Type test  Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alberto Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date <b>/ /</b>
Licensed Driller/Pump Installer		Apprentice	

**TDLR FORM 004WWD**  
**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-97**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) Grid #** **83 - 13 - 4**

**6) Drilling Date**

Started	<b>6/12/00</b>
Completed	<b>6/12/00</b>

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion										
0	2	Miscellaneous debris - clay, silt, drk. brown/ Tan to brown clayey silt	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>										
2	7	Tan clay	If Gravel Packed give the Interval from _____ ft. to _____ Ft.										
7	10	Tan/orange silt	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>										
10	16	Tan silty sand	<table border="1"> <tr> <th>Dia. (in.)</th> <th>New Or Used</th> <th>Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial</th> <th>Setting (ft) From To</th> <th>Gage Casing Screen</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen									

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **5**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type    Depth

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Alfredo Palacios*    Date **6/23/01**    Signature \_\_\_\_\_    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Licensed Driller/Pump Installer    Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

### WELL REPORT

#### 1) OWNER

#### A. WELL IDENTIFICATION AND LOCATION DATA

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

#### 2) WELL LOCATION

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-98</b>	Lat.	Long.	Grid # <b>83 - 13 - 4</b>	5) <b>N↑</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No				
--	--	--	--	--

6) Drilling Date Started <b>6/12/00</b> Completed <b>6/12/00</b>	Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2.5</b> <b>SURFACE</b> <b>16.0</b>			7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>	
--	--	--	--	---	--

From (ft)    To (ft)    Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>			
<b>0</b> <b>8</b> <b>Orange/brown clay &amp; sand coarse grained</b>	If Gravel Packed give the Interval from _____ ft. to _____ Ft.			
<b>8</b> <b>9.5</b> <b>Becoming tan/orange clay</b>	Casing; Blank Pipe, and Well Screen Data <b>N/A</b>			
<b>9.5</b> <b>14</b> <b>Tan silt (minor clay)</b>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To Gage Casing Screen
<b>14</b> <b>16</b> <b>Tan silt</b>				

9) Cementing Data Cementing from <b>0</b> ft. to <b>16.0</b> ft. # of sacks used <b>5</b> ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____				
--	--	--	--	--

(Use reverse side of Well Owner's copy, If necessary)				
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13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>				
Casing left in well:	Cement/Bentonite placed in well:			
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used				

14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____				
Depth to pump bowls, cylinder, jet, etc., _____ ft.				

15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.				
--	--	--	--	--

16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No				
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Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>	
Signature <i>[Signature]</i>	Date <b>06/01</b>	Signature	Date	
Licensed Driller/Pump Installer		Apprentice		

Attention Owner:  
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on reverse side of owner's copy.

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P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

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and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-99**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/12/00**  
Completed **6/12/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	1	Drk. brown silt, sand and clay
1	3	Tan clayey silt
3	9	Tan silty clay
9	14	Tan clay
14	16	Tan silt

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

Casing, Blank Pipe, and Well Screen Data					N/A
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**     Well plugged within 48 hours    N/A  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft) To (ft) From (ft) To (ft) Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **5**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    N/A  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth

N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**  
Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**  
Signature *Alfredo Palacios*    Date **1/23/01**    Signature \_\_\_\_\_    Date \_\_\_\_\_  
Licensed Driller/Pump Installer    Apprentice    Date

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-100**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83 - 13 - 4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/12/00**  
Completed **6/12/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	8	Clay/silt/shells, tan/ Tan silty clay
8	8.7	Tan sand silt
8.7	12	Tan clayey silt
12	16	Tan sandy silt

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **5**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

**N/A**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 84</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-101</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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**6) Drilling Date**

Started <b>6/12/00</b>	Diameter of Hole			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
Completed <b>6/12/00</b>	Dia. (in)	From (ft)	To (ft)	
	<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>			
0	8	Shells & silt, tan/ Tan silty clay	If Gravel Packed give the interval from    ft. to    ft.			
8	9.8	Tan sandy silt	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>			
9.8	11.5	Tan, clay	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To
11.5	13	Tan silt				Gage Casing Screen
13	16	Green sand				

**9) Cementing Data**  
Cementing from 0 ft. to 16.0 ft. # of sacks used 5  
ft. to    ft. # of sacks used     
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination    ft.  
Method of verification of above distance   

**13) Plugged:**     Well plugged within 48 hours    **N/A**  
Casing left in well:    Cement/Bentonite placed in well:  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other  
Depth to pump bowls, cylinder, jet, etc.,    ft.

**15) Water Test**    **N/A**  
Type test     Pump     Bailer     Jetted     Estimated  
Yield:    gpm with    ft. drawdown after    hrs.

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water    Depth of Strata  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
Static level    ft. below    Date    /    /  
Artesian Flow    gpm.    Date    /    /

**12) Packers**    Type    Depth  
**N/A**

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature	Date
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

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This form must be completed  
and filed with the department  
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Email address: water.well@license.state.tx.us

**WELL REPORT**

<b>1) OWNER</b>					<b>A. WELL IDENTIFICATION AND LOCATION DATA</b>															
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>		City <b>Corpus Christi</b>		State <b>TX</b>		Zip												
<b>2) WELL LOCATION</b>																				
County <b>NUECES</b>		Physical Address <b>5300 Up River Road</b>		City <b>Corpus Christi</b>		State <b>TX</b>		Zip												
<b>3) Type of Work</b>		Lat.		Long.		Grid # <b>83-13-4</b>														
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p style="text-align: center;"><b>B-102</b></p>		<b>4) Proposed Use (check)</b>				<b>5)</b>														
		<input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No				<b>N↑</b>														
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b>															
Started <b>6/12/00</b>		Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>															
Completed <b>6/12/00</b>		<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>																
From (ft)		To (ft)		Description and color of formation material			<b>8) Borehole Completion</b>													
0		1		<b>Brown silt &amp; clay w/shell</b>			<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>													
1		7		<b>Tan silty clay</b>			If Gravel Packed give the Interval from _____ ft. to _____ Ft.													
7		8.7		<b>Tan silt</b>			<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>													
8.7		10		<b>Tan clay</b>			Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen									
10		11.3		<b>Tan sandy silt</b>																
11.3		16		<b>Tan sand</b>																
(Use reverse side of Well Owner's copy, If necessary)																				
<b>13) Plugged</b>					<b>9) Cementing Data</b>															
<input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>					From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						Cementing from <b>0</b> ft. to <b>16.0</b> ft. # of sacks used <b>5</b> Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____					
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used																
<b>14) Typepump</b>					<b>10) Surface Completion</b>															
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <b>N/A</b> <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.					<input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used															
<b>15) Water Test</b>					<b>11) Water Level</b>															
Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated <b>N/A</b> Yield: _____ gpm with _____ ft. drawdown after _____ hrs.					Static level _____ ft. below    Date / / Artesian Flow _____ gpm.    Date / /															
<b>16) Water Quality</b>					<b>12) Packers</b>															
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No					_____ Type _____ Depth _____ <b>N/A</b>															
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>5036-M</b>													
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>		State <b>TX</b>		Zip <b>77549</b>												
Signature <i>Alfredo Palacios</i>			Date <b>6/23/01</b>		Signature _____			Date / /												
Licensed Driller/Pump Installer					Apprentice			Date												

**OWNER**

Attention Owner:  
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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

<b>1) OWNER</b>	
Name <b>Encycle</b>	Address <b>5300 Up River Road</b>
City <b>Corpus Christi</b>	State <b>TX</b>
Zip	

<b>2) WELL LOCATION</b>	
County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>
City <b>Corpus Christi</b>	State <b>TX</b>
Zip	

<b>3) Type of Work</b>		Lat.	Long.	Grid # <b>83 - 13 - 4</b>
<input type="checkbox"/> New Well	<input type="checkbox"/> Deepening	<b>4) Proposed Use (check)</b>		
<input type="checkbox"/> Reconditioning	<b>B-103</b>	<input type="checkbox"/> Monitor	<input checked="" type="checkbox"/> Environmental Soil Boring	<input type="checkbox"/> Domestic
		<input type="checkbox"/> Industrial	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Injection
		<input type="checkbox"/> Public Supply	<input type="checkbox"/> De-watering	<input type="checkbox"/> Testwell
		If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No		

<b>6) Drilling Date</b>		<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b>	
Started	<b>6/12/00</b>	Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Driven	<b>5) N↑</b>
Completed	<b>6/12/00</b>	<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>	<input type="checkbox"/> Air Rotary	
					<input type="checkbox"/> Mud Rotary	
					<input type="checkbox"/> Bored	
					<input type="checkbox"/> Air Hammer	<input type="checkbox"/> Cable Tool
					<input type="checkbox"/> Jetted	
					<input checked="" type="checkbox"/> Other <b>Direct Push</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b>			
0	3.5	Tan silty clay to clay	<input type="checkbox"/> Open Hole	<input type="checkbox"/> Straight Wall		
3.5	10.5	Tan clay	<input type="checkbox"/> Under-reamed	<input type="checkbox"/> Gravel Packed	<input checked="" type="checkbox"/> Other <b>PLUGGED</b>	
10.5	11.5	Tan, sandy silt	If Gravel Packed give the interval from _____ ft. to _____ Ft.			
11.5	13	Tan clay	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>			
13	15	Gray clay	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To
15	16	Gray silt sand				Gage Casing Screen

**9) Cementing Data**  
Cementing from 0 ft. to 16.0 ft. # of sacks used 5  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours **N/A**

Casing left in well:		Cement/Bentonite placed in well:		Sacks used
From (ft)	To (ft)	From (ft)	To (ft)	

**14) Typepump** **N/A**

Turbine  Jet  Submersible  Cylinder

Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** **N/A**

Typetest  Pump  Bailer  Jetted  Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_

Was a chemical analysis made?  Yes  No

**10) Surface Completion** **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below \_\_\_\_\_ Date   /  /    
Artesian Flow \_\_\_\_\_ gpm. Date   /  /  

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**

Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**

Signature *Alfredo Palacios* Date **6/23/01** Signature \_\_\_\_\_ Date \_\_\_\_\_

Licensed Driller/Pump Installer \_\_\_\_\_ Apprentice \_\_\_\_\_

**OWNER**

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Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-104**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/13/00**  
Completed **6/13/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>3</b>	<b>Mix of debris, clay, silt-tan, black, green/ Brown silty clay</b>
<b>3</b>	<b>4.7</b>	<b>Tan silty clay</b>
<b>4.7</b>	<b>9.5</b>	<b>Brown-mix of drk. brown to brown silty clay</b>
<b>9.5</b>	<b>15.5</b>	<b>Tan clay</b>
<b>15.5</b>	<b>16</b>	<b>Gray silt</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **6**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

- New Well     Deepening  
 Reconditioning  
**B-105, B-106, & B-107**

Lat.	Long.	Grid #
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- 4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/23/00**  
Completed **6/23/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>12.0</b>

**7) Drilling Method (check)**

- Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Brown silty CLAY</b>
<b>1</b>	<b>10</b>	<b>Tan silty CLAY</b>
<b>10</b>	<b>12</b>	<b>Tan sandy silt</b>

- 8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A	
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	
			From	To		

**9) Cementing Data**

Cementing from **0** ft. to **12.0** ft. # of sacks used **2**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

- Well plugged within 48 hours    **N/A**

Casing left in well:		Cemen/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**

- N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

- Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_    **N/A**  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

- Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	<b>N/A</b>

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>4/5/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-108**

Lat.	Long.	Grid # <b>83 - 13 - 4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/20/00**  
Completed **6/20/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>18.0</b>

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>6</b>	<b>Brown silty clay</b>
<b>6</b>	<b>11</b>	<b>Tan silty clay</b>
<b>11</b>	<b>13</b>	<b>Tan silty sand</b>
<b>13</b>	<b>18</b>	<b>Grade to tan sand</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**  
Cementing from **0** ft. to **18.0** ft. # of sacks used **9**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    **N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

12) Packers	Type	Depth
<b>N/A</b>		

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	Date

**OWNER**



Attention: Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-110**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/14/00**  
Completed **6/14/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	1	Mix of shells, silt, clay, sand, tan
1	6.7	Tan silty clay
6.7	8	Tan silt
8	10	Tan sandy silt
10	13	Tan silty clay
13	15.5	Tan clay
15.5	16	Tan sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A	
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	
			From	To		

**13) Plugged**

Well plugged within 48 hours    N/A  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **7**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    N/A  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**

Pump     Bailer     Jetted     Estimated    N/A  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

12) Packers	Type	Depth
N/A		

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>		Date <b>6/15/01</b>	Signature _____ Apprentice _____ Date _____	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-111**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**Grid #** 83-13-4  
**5)**                  **N↑**

**6) Drilling Date**

Started 6/14/00  
Completed 6/14/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	24.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	.5	Very drk. brown sand & silt
.5	4	Mix of tan & brown clayey silt, yellow sand
4	16	Tan/brown clay to silty clay
16	20	Orange clay
20	21	Interbedded clay silt with sand lenses
21	24	Silty clay

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**     Well plugged within 48 hours    N/A  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**9) Cementing Data**  
Cementing from 0 ft. to 24.0 ft. # of sacks used 9  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used TREMIE  
Cementing By ALFREDO PALACIOS  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    N/A  
**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth  
N/A

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>	
Signature <i>Alfredo Palacios</i>	Date <u>6/14/01</u>	Signature _____	Date ____/____/____	
Licensed Driller/Pump Installer		Apprentice		Date

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-112**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 6/27/00  
Completed 6/27/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	20.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	10.5	Tan silty clay
10.5	18.5	Orange clay
18.5	20	Tan to orange/green

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					Setting (ft)		Gage Casing Screen
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	From	To	From	To	

**9) Cementing Data**

Cementing from 0 ft. to 20.0 ft. # of sacks used 3  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used TREMIE  
Cementing by ALFREDO PALACIOS  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:			Sacks used
From (ft)	To (ft)	From (ft)	To (ft)		

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date / /  
Artesian Flow \_\_\_\_\_ gpm.    Date / /

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-113</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
--	--------------

6) Drilling Date Started <b>6/22/00</b> Completed <b>6/22/00</b>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 18.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
--	--	---

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	6	Brown SILTY CLAY	If Gravel Packed give the Interval from _____ ft. to _____ ft. <b>- Casing, Blank Pipe, and Well Screen Data N/A</b>
6	10	Tan SITLY CLAY	
10	13.8	Orange CLAY	
13.8	18	Brown SITLY SAND	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

9) Cementing Data  
Cementing from **0** ft. to **18.0** ft. # of sacks used **7**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

13) Plugged  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

14) Typepump **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

15) Water Test **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

16) Water Quality  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

10) Surface Completion **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

11) Water Level  
Static level \_\_\_\_\_ ft. below Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm. Date **/ /**

12) Packers Type \_\_\_\_\_ Depth \_\_\_\_\_  
**N/A**

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>
Licensed Driller/Pump Installer	Apprentice
	Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

<b>3) Type of Work</b>	<b>Lat.</b>	<b>Long.</b>	<b>Grid # 83 - 13 - 4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-114</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
---	---	---------------------

<b>6) Drilling Date</b> Started <u>7/10/00</u> Completed <u>7/10/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	16.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>																																
0	2	Caliche then silty sand to sand	If Gravel Packed give the Interval from _____ ft. to _____ ft. <b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b> <table border="1"> <thead> <tr> <th rowspan="2">Dia. (in.)</th> <th rowspan="2">New Or Used</th> <th rowspan="2">Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial</th> <th colspan="2">Setting (ft)</th> <th rowspan="2">Gage Casing Screen</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	From	To																								
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial					Setting (ft)			Gage Casing Screen																									
				From	To																														
2	6.7	Brown clayey silt																																	
6.7	11	Tan silty clay																																	
11	11.7	Orange clay																																	
11.7	16	Tan silt																																	

**9) Cementing Data**  
 Cementing from 0 ft. to 16.0 ft. # of sacks used 2  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <thead> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used																<b>10) Surface Completion</b> <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used																	

<b>14) Typepump</b> <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>11) Water Level</b> Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____
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<b>15) Water Test</b> <b>N/A</b> Typepump <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>12) Packers</b> Type _____    Depth _____ <b>N/A</b>
--	--

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type _____    Depth _____ <b>N/A</b>
---	--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <u>7/10/01</u>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

1) OWNER										A. WELL IDENTIFICATION AND LOCATION DATA									
Name <b>Encycle</b>					Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip		
2) WELL LOCATION																			
County <b>Nueces</b>					Physical Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip		
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-115</b>					4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No					5) <b>N↑</b>									
6) Drilling Date Started <u>6/26/02</u> Completed <u>6/26/02</u>					Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2    SURFACE    16.0</b>					7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>									
From (ft)    To (ft)    Description and color of formation material					8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the interval from _____ ft. to _____ ft.					Casing, Blank Pipe, and Well Screen Data									
<b>0    1    Tan SAND</b>										Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From    To    Gage Casing Screen									
<b>1    10.9    Tan SILTY CLAY</b>										N/A									
<b>10.9    14    Orange CLAY</b>																			
<b>14    16    Gray SILTY SAND to SAND</b>																			
(Use reverse side of Well Owner's copy, If necessary)										9) Cementing Data Cementing from <u>0</u> ft. to <u>16.0</u> ft. # of sacks used <u>1</u> _____ ft. to _____ ft. # of sacks used _____ Method Used <u>TREMIE</u> Cementing By <u>CALISTRO CAMPOZANO</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____									
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>					Casing left in well:    Cement/Bentonite placed in well:					10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used									
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used										11) Water Level <b>N/A</b> Static level _____ ft. below    Date <u>  /  /  </u> Artesian Flow _____ gpm.    Date <u>  /  /  </u>									
14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____					15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.					12) Packers    Type    Depth <b>N/A</b>									
16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No					Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b> Lic. No. <b>4997-M</b>														
Address <b>P.O. BOX 845</b>					City <b>FRIENDSWOOD</b>					State <b>TX</b>					Zip <b>77549</b>				
Signature <i>Ab. J...</i> Licensed Driller/Pump Installer					Date <b>6/17/02</b>					Signature _____ Apprentice					Date <b>6/17/02</b>				

Attention Owner:  
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on reverse side of owner's copy.

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

**3) Type of Work** **Lat.** **Long.** **Grid # 83 - 13 - 4**

New Well  Deepening  Reconditioning **B-116**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
 If Public Supply well, were plans submitted to the TNRCC?  Yes  No

<b>6) Drilling Date</b> Started <u>7/10/00</u>  Completed <u>7/10/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	20.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	1	Tan sand	If Gravel Packed give the Interval from _____ ft. to _____ ft.
1	10.9	Tan silty clay	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>
10.9	14.8	Orange clay	Dia. (in.) New Or Used Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial Setting (ft) From To Gage Casing Screen
14.8	19	Gray silty sand to sand	
19	20	Tan/gray sand	

From (ft)	To (ft)	Description and color of formation material	Setting (ft) From To Gage Casing Screen

**9) Cementing Data**  
Cementing from 0 ft. to 20.0 ft. # of sacks used 2  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft) To (ft) From (ft) To (ft) Sacks used

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **7/23/01** Signature **Apprentice** Date \_\_\_\_\_

Attention Owner:  
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This form must be completed  
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and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**  
Name: **Encycle** Address: **5300 Up River Road** City: **Corpus Christi** State: **TX** Zip: \_\_\_\_\_

**2) WELL LOCATION**  
County: **NUECES** Physical Address: **5300 Up River Road** City: **Corpus Christi** State: **TX** Zip: \_\_\_\_\_

**3) Type of Work**  
 New Well  Deepening  
 Reconditioning **B-117**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**6) Drilling Date**  
Started 6/23/00  
Completed 6/23/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	15.0

**7) Drilling Method (check)**  Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	1.5	White rocks, CLAY
1.5	6.3	Brown SILTY CLAY
6.3	9.0	Tan SILTY CLAY
9.0	14	Orange CLAY
14	15	Tan SILT

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data** -N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**9) Cementing Data**  
Cementing from 0 ft. to 15.0 ft. # of sacks used 5  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours N/A

Casing left in well:		Cement/Bentonite placed in well:		Sacks used
From (ft)	To (ft)	From (ft)	To (ft)	

**10) Surface Completion** N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump** N/A  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below Date / /  
Artesian Flow \_\_\_\_\_ gpm. Date / /

**15) Water Test** N/A  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
N/A	

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date 6/23/01 Signature \_\_\_\_\_ Date \_\_\_\_\_  
Licensed Driller/Pump Installer Apprentice

**OWNER**



Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

A. WELL IDENTIFICATION AND LOCATION DATA											
<b>1) OWNER</b>		Name		Address		City		State		Zip	
		Encycle		5300 Up River Road		Corpus Christi		TX			
<b>2) WELL LOCATION</b>											
County		Physical Address				City		State		Zip	
NUECES		5300 Up River Road				Corpus Christi		TX			
<b>3) Type of Work</b>		Lat.		Long.		Grid # 83 - 13 - 4					
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-119</b>		<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No						<b>5)</b>		N↑	
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>				<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven					
Started 6/27/00		Dia. (in)	From (ft)	To (ft)		<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored	<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted				
Completed 6/27/00		2.5	SURFACE	20.0		<input checked="" type="checkbox"/> Other <u>Direct Push</u>					
From (ft)		To (ft)	Description and color of formation material							<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the Interval from _____ ft. to _____ ft.	
0		3	Drk. brown clay, caliche mixed in								
3		8	Tan/brown silty clay, olive green apx. 4' to 8'								
8		19	Tan/olive green clay								
19		20	Green silt, very minor sand								
<b>Casing, Blank Pipe, and Well Screen Data</b> N/A											
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial			Setting (ft) From To		Gage Casing Screen				
<b>9) Cementing Data</b>											
Cementing from <u>0</u> ft. to <u>20.0</u> ft. # of sacks used <u>3</u> _____ ft. to _____ ft. # of sacks used _____ Method Used <u>TREMIE</u> Cementing By <u>ALFREDO PALACIOS</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____											
<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours    N/A											
Casing left in well:		Cement/Bentonite placed in well:									
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							
<b>14) Typepump</b> N/A											
<input type="checkbox"/> Turbine	<input type="checkbox"/> Jet	<input type="checkbox"/> Submersible	<input type="checkbox"/> Cylinder								
<input type="checkbox"/> Other											
Depth to pump bowls, cylinder, jet, etc., _____ ft.											
<b>15) Water Test</b> N/A											
Typepump	<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Jetted	<input type="checkbox"/> Estimated							
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.											
<b>16) Water Quality</b>											
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No											
<b>12) Packers</b>							Type	Depth			
N/A											
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>5036-M</b>				
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>		State <b>TX</b>		Zip <b>77549</b>			
Signature <i>Alfredo Palacios</i>				Date <b>01</b>		Signature		Date <b>/ /</b>			
Licensed Driller/Pump Installer				Apprentice		Date					

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

A. WELL IDENTIFICATION AND LOCATION DATA																																				
<b>1) OWNER</b>																																				
Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip																																
<b>2) WELL LOCATION</b>																																				
County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip																																
<b>3) Type of Work</b>		Lat. _____ Long. _____		Grid # <b>83-13-4</b>																																
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-120</b></p>		<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>5)</b> <b>N↑</b>																																
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>		<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>																																
Started	<b>6/28/00</b>	Dia. (in)	From (ft)																																	
Completed	<b>6/28/00</b>	<b>2.5</b>	<b>SURFACE</b>																																	
			<b>24.0</b>																																	
From (ft)	To (ft)	Description and color of formation material		<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the Interval from _____ ft. to _____ ft. <b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Dia. (in.)</th> <th rowspan="2">New Or Used</th> <th rowspan="2">Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial</th> <th colspan="2">Setting (ft)</th> <th rowspan="2">Gage Casing Screen</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	From	To																								
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)					Gage Casing Screen																												
			From		To																															
<b>0</b>	<b>4.1</b>	<b>Drk. brown silty clay</b>																																		
<b>4.1</b>	<b>8</b>	<b>Tan silty clay</b>																																		
<b>8</b>	<b>19</b>	<b>Orange clay</b>																																		
<b>19</b>	<b>24</b>	<b>Green silt</b>																																		
(Use reverse side of Well Owner's copy, If necessary)																																				
<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>		Cement/Bentonite placed in well:																																		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used																																
<b>14) Typepump</b>		<b>N/A</b>																																		
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____																																				
Depth to pump bowls, cylinder, jet, etc., _____ ft.																																				
<b>15) Water Test</b>		<b>N/A</b>																																		
Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.																																				
<b>16) Water Quality</b>																																				
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No																																				
<b>10) Surface Completion</b>			<b>N/A</b>																																	
<input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used																																				
<b>11) Water Level</b>																																				
Static level _____ ft. below		Date ____/____/____																																		
Artesian Flow _____ gpm.		Date ____/____/____																																		
<b>12) Packers</b>																																				
		Type	Depth																																	
<b>N/A</b>																																				
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>																																	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>																																
Signature <i>Alfredo Palacios</i>		Date <b>2/23/01</b>	Signature _____ Date _____																																	
Licensed Driller/Pump Installer		Apprentice		Date																																

**OWNER**

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us  
**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

<b>3) Type of Work</b>	<b>Lat.</b>	<b>Long.</b>	<b>Grid # 83-13-4</b>
------------------------	-------------	--------------	-----------------------

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-121</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
---	---	---------------------

<b>6) Drilling Date</b> Started <u>6/28/00</u> Completed <u>6/28/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>					
0	0.3	Brown clay	If Gravel Packed give the Interval from _____ ft. to _____ ft.					
0.3	8	Tan silty clay	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>					
8	19.8	Tan-orange clay	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From	To	Gage Casing Screen
19.8	20	Gray sandy silt						

**9) Cementing Data**  
 Cementing from 0 ft. to 20.0 ft. # of sacks used 6  
 Method Used **TREMIE**  
 Cementing By **ALFREDO PALACIOS**

**13) Plugged**     Well plugged within 48 hours    **N/A**  
 Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.  
**15) Water Test**    **N/A**  
 Type test  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
 Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

12) Packers	Type	Depth
<b>N/A</b>		

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer	Date	Apprentice	Date

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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-122</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b> Grid # <b>89-13-4</b>
---	---	--

**6) Drilling Date**

Started <u>6/30/00</u>  Completed <u>6/30/00</u>	<b>Diameter of Hole</b> <table border="1"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td>2.5</td> <td>SURFACE</td> <td>24.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	24.0	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
Dia. (in)	From (ft)	To (ft)						
2.5	SURFACE	24.0						

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall				
0	3.7	Brown CLAY	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the Interval from _____ ft. to _____ ft.				
3.7	8.1	Tanish/brown SILT CLAY	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>				
8.1	19.5	Brown CLAY	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen
19.5	23	Green SILTY CLAY					
23	24	Green SANDY SILT					

(Use reverse side of Well Owner's copy, if necessary)

**9) Cementing Data**  
 Cementing from 0 ft. to 24.0 ft. # of sacks used 11  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

**15) Water Test**    N/A  
 Type test     Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
 Static level \_\_\_\_\_ ft. below    Date / /  
 Artesian Flow \_\_\_\_\_ gpm.    Date / /

**12) Packers**    Type    Depth

<u>N/A</u>		
------------	--	--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <u>P.O. BOX 845</u>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <u>Alfredo Palacios</u> Licensed Driller/Pump Installer	Date <u>6/23/01</u>	Signature _____ Apprentice	Date _____

**OWNER**

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and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-123</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
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6) Drilling Date Started <u>6/30/00</u> Completed <u>6/30/00</u>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 20.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
--	--	---

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	3.7	Brown CLAY	If Gravel Packed give the interval from _____ ft. to _____ Ft.
3.7	8.1	Tanish/brown SILT CLAY	
8.1	19.7	Brown CLAY	
19.7	20	Green SILTY CLAY	

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

9) Cementing Data  
Cementing from 0 ft. to 20.0 ft. # of sacks used 11  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used TREMIE  
Cementing By ALFREDO PALACIOS

13) Plugged  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

14) Typepump **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_

15) Water Test **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

16) Water Quality  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

10) Surface Completion **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

11) Water Level  
Static level \_\_\_\_\_ ft. below Date / /  
Artesian Flow \_\_\_\_\_ gpm. Date / /

12) Packers Type \_\_\_\_\_ Depth \_\_\_\_\_  
**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date 6/30/01 Signature \_\_\_\_\_ Date \_\_\_\_\_  
Licensed Driller/Pump Installer Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name **Encycle** Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip

**2) WELL LOCATION**

County **NUECES** Physical Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip

**3) Type of Work**

New Well  Deepening  
 Reconditioning  
**B-124, B-125, & B-126**

Lat. Long. Grid # **83-13-4**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**5)** **N↑**

**6) Drilling Date**

Started **6/29/00**  
Completed **6/29/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	24.0

**7) Drilling Method (check)**

Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	4	<b>Brown silty clay</b>
4	23.5	<b>Orange clay w/ gray/green</b>
23.5	24	<b>Tan silty sand</b>

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from ft. to ft.

Casing, Blank Pipe, and Well Screen Data					N/A
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **24.0** ft. # of sacks used **10**  
ft. to ft. # of sacks used  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination ft.  
Method of verification of above distance

**13) Plugged**

Casing left in well:		Cement/Bentonite placed in well:		Sacks used
From (ft)	To (ft)	From (ft)	To (ft)	

**10) Surface Completion**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine  Jet  Submersible  Cylinder  
 Other  
Depth to pump bowls, cylinder, jet, etc., ft.

**11) Water Level**

Static level ft. below Date / /  
Artesian Flow gpm. Date / /

**15) Water Test**

Type test  Pump  Bailer  Jetted  Estimated  
Yield: gpm with ft. drawdown after hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water Depth of Strata  
Was a chemical analysis made?  Yes  No

**12) Packers**

Type	Depth
N/A	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **6/29/01** Signature **Apprentice** Date

**OWNER**

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
*Water Well Driller/Pump Installer Program*  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-127</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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**6) Drilling Date**

Started <b>6/28/00</b>	<b>Diameter of Hole</b> Dia. (in)    From (ft)    To (ft)			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
Completed <b>6/28/00</b>	<b>2.5</b>	<b>SURFACE</b>	<b>20.0</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>		
0	1.5	Brown silty clay	If Gravel Packed give the Interval from _____ ft. to _____ ft.		
1.5	4	Tan silty clay	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>		
4	17.2	Orange clay	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial
17.2	20	Gray/green silt	Setting (ft) From	To	Gage Casing Screen

(Use reverse side of Well Owner's copy, If necessary)			<b>9) Cementing Data</b>		
			Cementing from <b>0</b> ft. to <b>20.0</b> ft. # of sacks used <b>6</b>		
			Method Used <b>TREMIE</b>		
			Cementing By <b>ALFREDO PALACIOS</b>		
			Distance to septic system field or other concentrated contamination _____ ft		
			Method of verification of above distance _____		

**13) Plugged**

<input type="checkbox"/> Well plugged within 48 hours		N/A	
Casing left in well:		Cement/Bentonite placed in well:	
From (ft)	To (ft)	From (ft)	To (ft)
			Sacks used

**14) Typepump**

<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____	N/A
Depth to pump bowls, cylinder, jet, etc., _____ ft.	

**15) Water Test**

Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	N/A
--	-----

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type    Depth _____ <b>N/A</b>
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Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>6/23/01</b>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-128</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
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<b>6) Drilling Date</b> Started <u>6/28/00</u> Completed <u>6/28/00</u>	<b>Diameter of Hole</b> <table border="1" style="width:100%"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2.5</td> <td align="center">SURFACE</td> <td align="center">24.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	24.0	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
Dia. (in)	From (ft)	To (ft)						
2.5	SURFACE	24.0						

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>			
0	7	<b>Brown silty clay</b>	If Gravel Packed give the Interval from _____ ft. to _____ ft.			
7	14.2	<b>Orange-tan-green clay, minor silt</b>	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>			
14.2	15.7	<b>Green silt, minor sand</b>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To
15.7	22	<b>Orange-green clay</b>				Gage Casing Screen
22	24	<b>Green silt</b>				

<b>9) Cementing Data</b> Cementing from <u>0</u> ft. to <u>24.0</u> ft. # of sacks used <u>6</u> Method Used <u>TREMIE</u>	Cementing By <u>ALFREDO PALACIOS</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
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<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1" style="width:100%"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						<b>10) Surface Completion</b> <u>N/A</u> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> <u>N/A</u> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>11) Water Level</b> Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____
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<b>15) Water Test</b> <u>N/A</u> Type/test <input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>12) Packers</b> Type    Depth <u>N/A</u>
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<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type    Depth <u>N/A</u>
--	--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <u>P.O. BOX 845</u>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <u>Alfredo Palacios</u>	Date <u>1/23/01</u>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer	Apprentice	Apprentice	Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-129**

Lat.	Long.	Grid # <b>83-13-4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/29/00**

Completed **6/29/00**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	4	Brown silty clay
4	8	Tan silty clay
8	14	Tan clay
14	15.5	Tan silty sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ Ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **16.0** ft. # of sacks used **8**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIÉ**

Cementing By **ALFREDO PALACIOS**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

**Typetest**     Pump     Bailer     Jetted     Estimated    **N/A**

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?

Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**

Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Alfredo Palacios*    Date **6/23/01**    Signature \_\_\_\_\_    Date **/ /**  
Licensed Driller/Pump Installer    Apprentice    Date

**OWNER**



Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening     Reconditioning

**B-131, B-133, B-136, & B-138**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**6) Drilling Date**

Started 6/16/00

Completed 6/16/00

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

**5) N↑**

From (ft)	To (ft)	Description and color of formation material
0	1.0	Shells, SAND, CLAY, brown
1.0	4	Saturated SAND, shells

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from 0 ft. to 4.0 ft. # of sacks used 1  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By CALISTRO CAMPOZANO

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    N/A

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type    Depth

N/A

N/A

N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **4997-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature Ali Truong    Date **6/17/02**    Signature \_\_\_\_\_    Date **6/17/02**  
Licensed Driller/Pump Installer    Date    Apprentice    Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well  Deepening  
 Reconditioning  
**B-132**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**5) N↑**

**6) Drilling Date**

Started **6/16/00**  
Completed **6/16/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**  Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>3.7</b>	<b>Brown CLAY w/minor SILT</b>
<b>3.7</b>	<b>8</b>	<b>Tan SILTY CLAY</b>
<b>8</b>	<b>15.6</b>	<b>Tan-SILT w/minor fine to very fine SAND</b>
<b>15.6</b>	<b>16</b>	<b>Tan medium to fine grained SAND</b>

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test** **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level** **N/A**  
Static level \_\_\_\_\_ ft. below Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

<b>12) Packers</b>	Type	Depth
<b>N/A</b>		

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Al...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature _____ Apprentice	Date <b>6/17/02</b>

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-134**

Lat. **27**    **48**    **35**    Long. **97**    **27**    **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/16/00**  
  
Completed **6/16/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	8	<b>Mixture of SAND, SILT, CLAY, rocks</b>
8	11	<b>Brown/tan SILTY CLAY</b>
11	12	<b>Brown SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

(Use reverse side of Well Owner's copy, If necessary)

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**  
Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**15) Water Test**    **N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_  
**N/A**

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>[Signature]</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature _____ Apprentice	Date <b>6/17/02</b>

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b> 27   48   35	<b>Long.</b> 97   27   18	<b>Grid #</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-135</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
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<b>6) Drilling Date</b> Started <u>6/16/00</u> Completed <u>6/16/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	16.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	3	Brown SANDY SILT, shells	If Gravel Packed give the interval from _____ ft. to _____ ft.
3	10	Brown, SILTY CLAY w/shells	
10	13	Tan SANDY SILT	
13	16	Tan SAND	

Casing, Blank Pipe, and Well Screen Data		Setting (ft) From    To	Gage Casing Screen
Dia. (in.)	New Or Used		
	N/A		

**9) Cementing Data**  
 Cementing from 0 ft. to 16.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By CALISTRO CAMPOZANO  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A  
 Type test  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**    N/A  
 Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type    Depth  
 N/A

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>4997-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Al Francisco</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>
Signature _____ Apprentice	Date <b>6/17/02</b>

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-137**

Lat. **27** | **48** | **35**    Long. **97** | **27** | **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/16/00**  
Completed **6/16/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>12.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>3</b>	<b>Brown SAND, SILT, CLAY, rocks</b>
<b>3</b>	<b>8</b>	<b>Brown SILTY CLAY, pebbles within</b>
<b>8</b>	<b>11</b>	<b>Black SILTY CLAY</b>
<b>11</b>	<b>12</b>	<b>Brown SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **12.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **CALISTRO CAMPOZANO**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type    Depth

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**

Lic. No. **4997-M**

Address **P.O. BOX 845**

City **FRIENDSWOOD**

State **TX**

Zip **77549**

Signature *Al. Francisco*  
Licensed Driller/Pump Installer

**6/17/02**

Date

Signature \_\_\_\_\_  
Apprentice

**6/17/02**

Date

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
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and filed with the department  
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upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-139**

Lat. **27**    **48**    **35**    Long. **97**    **27**    **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **6/16/00**  
Completed **6/16/00**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>24.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>12</b>	<b>Brown SILTY CLAY to CLAY</b>
<b>12</b>	<b>22</b>	<b>Orange CLAY</b>
<b>22</b>	<b>23.5</b>	<b>Brown CLAYEY SILT</b>
<b>23.5</b>	<b>24</b>	<b>Brown SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **24.0** ft. # of sacks used **2**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes X **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>[Signature]</i>	Date <b>6/17/02</b>	Signature <b>Apprentice</b>	Date <b>6/17/02</b>

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name **Encycle** Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip

**2) WELL LOCATION**

County **NUECES** Physical Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip

3) Type of Work **B-140** Lat. Long. Grid # **83-13-4**

4) Proposed Use (check)  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

6) Drilling Date Started **6/29/00** Completed **6/29/00**  
Diameter of Hole  
Dia. (in) From (ft) To (ft)  
**2.5 SURFACE 6.0**  
7) Drilling Method (check)  Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

8) Borehole Completion  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from ft. to ft.

Casing, Blank Pipe, and Well Screen Data **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

9) Cementing Data  
Cementing from **0** ft. to **6.0** ft. # of sacks used **2**  
ft. to ft. # of sacks used  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination ft.  
Method of verification of above distance

13) Plugged  Well plugged within 48 hours **N/A**  
Casing left in well: Cement/Bentonite placed in well:  
From (ft) To (ft) From (ft) To (ft) Sacks used

14) Typepump **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other  
Depth to pump bowls, cylinder, jet, etc., ft.

15) Water Test **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: gpm with ft. drawdown after hrs.

16) Water Quality  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water Depth of Strata  
Was a chemical analysis made?  Yes  No

10) Surface Completion **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used  
11) Water Level  
Static level ft. below Date / /  
Artesian Flow gpm. Date / /  
12) Packers Type Depth  
**N/A**  
Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **6/29/01** Signature **Apprentice** Date / /

**OWNER**

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Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b> 27   48   35	<b>Long.</b> 97   27   18	<b>Grid #</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-141</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
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<b>6) Drilling Date</b> Started <u>6/16/00</u>  Completed <u>6/16/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	12.0	

From (ft)	To (ft)	Description and color of formation material
0	.5	<b>Brown CLAY, shells</b>
.5	5	<b>Tan CLAY</b>
5	12	<b>Gray/green SAND &amp; SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED  
 If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg, if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
 Cementing from 0 ft. to 12.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE

Cementing By CALISTRO CAMPOZANO  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    N/A  
 Static level \_\_\_\_\_ ft. below    Date / /  
 Artesian Flow \_\_\_\_\_ gpm.    Date / /

**15) Water Test**    N/A  
 Type test  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
N/A	

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes X NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>Ali...</i>	<b>6/17/02</b>	Signature	<b>6/17/02</b>
Licensed Driller/Pump Installer	Date	Apprentice	Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

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Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b>	<b>Long.</b>	<b>Grid # 83 - 13 - 4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p style="text-align: right;"><b>B-142</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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<b>6) Drilling Date</b> Started <u>6/29/00</u>  Completed <u>6/29/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	8.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall
0	0.7	Drk. brown clay	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0.7	6	Tan silty clay	If Gravel Packed give the interval from _____ ft. to _____ Ft.
6	6.1	Orange cemented sand & shells	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>
6.1	8	Gray/green sand	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From	To	Gage Casing Screen

**9) Cementing Data**  
 Cementing from 0 ft. to 8.0 ft. # of sacks used 3  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**  
 Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alberto Palacios</i>	Date <u>6/30/01</u>	Signature _____	Date _____
Licensed Driller/Pump Installer		Apprentice	



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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name **Encycle** Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**2) WELL LOCATION**

County **NUECES** Physical Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**3) Type of Work**

New Well  Deepening  
 Reconditioning  
**B-144, 145, & 146**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83 - 13 - 4**  
**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**5)** \_\_\_\_\_ **N↑**

**6) Drilling Date**

Started **7/11/00**  
Completed **7/11/00**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>8.0</b>

**7) Drilling Method (check)**  Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>.1</b>	<b>Topsoil, rocks</b>
<b>.1</b>	<b>1.7</b>	<b>Tan silty clay</b>
<b>1.7</b>	<b>3.9</b>	<b>Brown silty clay</b>
<b>3.9</b>	<b>5.2</b>	<b>Oyster bed</b>
<b>5.2</b>	<b>8</b>	<b>Black clayey sandy silt</b>

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data** **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**  Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft) To (ft) From (ft) To (ft) Sacks used

**9) Cementing Data**  
Cementing from **0** ft. to **8.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test** **N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**  
Static level \_\_\_\_\_ ft. below \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

**12) Packers** Type \_\_\_\_\_ Depth \_\_\_\_\_

<b>N/A</b>
------------

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **7/23/01** Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Apprentice \_\_\_\_\_ Date \_\_\_\_\_

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Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us  
**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-147**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83 - 13 - 4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 7/11/00  
Completed 7/11/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	4.0

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	1	Caliche, brown clay
1	3.7	Tan silty clay
3.7	4	Black coarse grained material (sand?)

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy. If necessary)

**9) Cementing Data**

Cementing from 0 ft. to 4.0 ft. # of sacks used 1  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    N/A

Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date / /  
Artesian Flow \_\_\_\_\_ gpm.    Date / /

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth

Type	Depth
N/A	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Alfredo Palacios*    Date 7/31/00    Signature \_\_\_\_\_    Date \_\_\_\_\_  
Licensed Driller/Pump Installer    Apprentice

**OWNER**

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
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and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-148 & 149**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83-13-4**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 7/11/00  
Completed 7/11/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	8.0

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	3	Brown silty clay
3	5	Black, brown silty clay, lithified rock/sand
5	8	Black clayey silt

**8) Borehole Completion**     Open Hole     Straight Wall

Under-reamed     Gravel Packed     Other PLUGGED  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from 0 ft. to 8.0 ft. # of sacks used 1  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used TREMIE  
Cementing By ALFREDO PALACIOS  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    N/A

Typetest  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth

Type	Depth
<u>N/A</u>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Licensed Driller/Pump Installer	Signature _____ Apprentice	Date <u>  /  /  </u>	Date _____

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

1) OWNER										
A. WELL IDENTIFICATION AND LOCATION DATA										
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>			State <b>TX</b>	Zip	
2) WELL LOCATION										
County <b>Nueces</b>		Physical Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>			State <b>TX</b>	Zip	
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-150</b>		Lat. <b>27</b> <b>48</b> <b>35</b>		Long. <b>97</b> <b>27</b> <b>18</b>		Grid #		5) <b>N↑</b>		
		4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No								
6) Drilling Date Started <b>11/05/01</b> Completed <b>11/05/01</b>		Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2</b> <b>SURFACE</b> <b>3.0</b>			7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Hand Auger</b>					
From (ft)    To (ft)    Description and color of formation material		8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.								
<b>0</b> <b>.8</b> <b>Brown, SANDY CLAY</b>										
<b>.8</b> <b>2.5</b> <b>Tan CLAY</b>										
<b>2.5</b> <b>3</b> <b>Brown SILT to CLAYEY SILT</b>										
		Casing, Blank Pipe, and Well Screen Data								
		Dia. (in.)		New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft) From To		Gage Casing Screen	
					<b>N/A</b>					
		9) Cementing Data Cementing from <b>0</b> ft. to <b>3.0</b> ft. # of sacks used <b>1</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>CALISTRO CAMPOZANO</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____								
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>		10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used								
Casing left in well: _____    Cement/Bentonite placed in well: _____		From (ft)    To (ft)		From (ft)    To (ft)		Sacks used				
14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____		11) Water Level <b>N/A</b> Static level _____ ft. below    Date <b>/ /</b> Artesian Flow _____ gpm.    Date <b>/ /</b>								
Depth to pump bowls, cylinder, jet, etc., _____ ft.										
15) Water Test <b>N/A</b> Type/test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.		12) Packers    Type    Depth <b>N/A</b>								
16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No										
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>4997-M</b>			
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>			State <b>TX</b>	Zip <b>77549</b>		
Signature <i>Ali J...</i>		Date <b>6/17/02</b>		Signature <i>CALISTRO CAMPOZANO</i>		Date <b>6/17/02</b>				
Licensed Driller/Pump Installer		Date		Apprentice		Date				

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-151**

Lat. **27**    **48**    **35**    Long. **97**    **27**    **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/05/01**  
  
Completed **11/05/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>3.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Hand Auger**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>3</b>	<b>Drk. brown CLAYEY SILT w/minor SAND content</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**

Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**    **N/A**

**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

<b>N/A</b>		
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**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Ali Jassim Alkhalil</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date <b>6/17/02</b>

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-152**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/05/01**

Completed **11/05/01**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>3.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Hand Auger**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>3</b>	<b>Brown/tan mix of SILT, SAND, CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **CALISTRO CAMPOZANO**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Typetest     Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?

Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**

Type    Depth

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**

Lic. No. **4997-M**

Address **P.O. BOX 845**

City **FRIENDSWOOD**

State **TX**

Zip **77549**

Signature *Ali...*    **6/17/02**  
Licensed Driller/Pump Installer    Date

Signature *CALISTRO CAMPOZANO*    **6/17/02**  
Apprentice    Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b>	<b>Long.</b>	<b>Grid # 83 - 13 - 4</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-153</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
---	---	---------------------

<b>6) Drilling Date</b> Started <u>7/10/00</u>  Completed <u>7/10/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	8.0	

From (ft)    To (ft)    Description and color of formation material <u>0</u> <u>.2</u> <b>White caliche</b> <u>.2</u> <u>5</u> <b>Mix of clay, rocks, shells</b> <u>5</u> <u>8</u> <b>Brown, green, black, silty sand &amp; silt</b>	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the Interval from _____ ft. to _____ ft.
---	--

Casing, Blank Pipe, and Well Screen Data		N/A				
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft)		Gage Casing Screen
		From	To	From	To	

<b>9) Cementing Data</b> Cementing from <u>0</u> ft. to <u>8.0</u> ft. # of sacks used <u>1</u> _____ ft. to _____ ft. # of sacks used _____ Method Used <u>TREMIE</u> Cementing By <u>ALFREDO PALACIOS</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
--

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used										
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used											

<b>14) Typepump</b> <u>N/A</u> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc. _____ ft.	<b>10) Surface Completion</b> <u>N/A</u> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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<b>15) Water Test</b> <u>N/A</u> Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>11) Water Level</b> Static level _____ ft. below    Date <u>/ /</u> Artesian Flow _____ gpm.    Date <u>/ /</u>
--	--

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes x <b>NO</b> If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type    Depth <u>N/A</u>
--	--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>5036-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <u>7/3/01</u>	Signature _____	Date <u>/ /</u>
Licensed Driller/Pump Installer		Apprentice	

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-154**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)** **Grid # 83 - 13 - 4**    **N↑**

**6) Drilling Date**

Started 7/10/00

Completed 7/10/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	8.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	.1	Caliche
.1	1.0	Brown clay w/rocks & shells
1.0	8	Drk. brown sandy silt

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED

If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    N/A

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 8.0 ft. # of sacks used 1  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By ALFREDO PALACIOS

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

Type test  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

12) Packers	Type	Depth
<u>N/A</u>		

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature: Alfredo Palacios    Date 7/23/01    Signature \_\_\_\_\_    Date \_\_\_\_\_  
Licensed Driller/Pump Installer    Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

<b>1) OWNER</b>									
<b>A. WELL IDENTIFICATION AND LOCATION DATA</b>									
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>		State <b>TX</b>	Zip	
<b>2) WELL LOCATION</b>									
County <b>NUECES</b>		Physical Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>		State <b>TX</b>	Zip	
<b>3) Type of Work</b>		Lat.		Long.		Grid # <b>83 - 13 - 4</b>			
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-155</b></p>		<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No					<b>5)</b> <b>N↑</b>		
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven				
Started <u>7/10/00</u>		Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>				
Completed <u>7/10/00</u>		<u>2.5</u>	<u>SURFACE</u>	<u>8.0</u>					
From (ft)		To (ft)	Description and color of formation material						
<u>0</u>		<u>1.3</u>	<u>Brown clay, rocks, shells</u>						
<u>1.3</u>		<u>3</u>	<u>Tan/brown sandy silt</u>						
<u>3</u>		<u>8</u>	<u>Brown silty sand</u>						
<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall					<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>				
If Gravel Packed give the Interval from					ft. to		ft.		
<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>									
	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial			Setting (ft) From To		Gage Casing Screen	
<b>9) Cementing Data</b>									
Cementing from <u>0</u> ft. to <u>8.0</u> ft. # of sacks used <u>1</u>									
Method Used <u>TREMIE</u>									
Cementing By <u>ALFREDO PALACIOS</u>									
Distance to septic system field or other concentrated contamination _____ ft.									
Method of verification of above distance _____									
<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u>									
Casing left in well:		Cement/Bentonite placed in well:							
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used					
<b>14) Typepump</b> <u>N/A</u>									
<input type="checkbox"/> Turbine	<input type="checkbox"/> Jet	<input type="checkbox"/> Submersible	<input type="checkbox"/> Cylinder						
<input type="checkbox"/> Other									
Depth to pump bowls, cylinder, jet, etc. _____ ft.									
<b>15) Water Test</b> <u>N/A</u>									
Type test	<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Jetted	<input type="checkbox"/> Estimated					
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.									
<b>16) Water Quality</b>									
Did you knowingly penetrate any strata which contain undesirable constituents?									
<input type="checkbox"/> Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?									
Type of water _____ Depth of Strata _____									
Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>5036-M</b>		
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>		State <b>TX</b>	Zip <b>77549</b>		
Signature <i>Alfredo Palacios</i>		Date <u>7/23/01</u>		Signature _____		Date _____		Date _____	
Licensed Driller/Pump Installer		Apprentice							

**OWNER**

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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
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 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** **Lat.**  **Long.**  **Grid # 83-13-4**

New Well     Deepening  
 Reconditioning  
**B-156, 157, & 158**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
 If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b> Started <u>7/10/00</u>  Completed <u>7/10/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>	<b>5)</b> <span style="float:right">N↑</span>
	Dia. (in)	From (ft)	To (ft)		
	2.5	SURFACE	4.0		

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	.1	White shells, sand	If Gravel Packed give the Interval from _____ ft. to _____ ft.
.1	1.0	Tan silty clay w/rocks & shells	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>
1.0	4	Gray sand	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**  
 Cementing from 0 ft. to 4.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u>				
Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A  
 Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
 Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers**    Type \_\_\_\_\_ Depth \_\_\_\_\_  
N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature Alfredo Palacios    Date 7/10/01    Signature \_\_\_\_\_    Date \_\_\_\_\_  
 Licensed Driller/Pump Installer    Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-159, 160, &amp; 161</b>	Lat.	Long.	Grid # <b>83-13-4</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <b>N↑</b>
--	--------------

6) Drilling Date Started <u>7/11/00</u> Completed <u>7/11/00</u>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2.5 SURFACE 4.0</b>	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
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From (ft) To (ft) Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the Interval from _____ ft. to _____ ft.
<b>0 2 Brown mix of silty clay, shells</b>	
<b>2 3.9 Brown sandy silt</b>	
<b>3.9 4.0 Gray sand</b>	

Casing, Blank Pipe, and Well Screen Data <b>N/A</b>				
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen

9) Cementing Data Cementing from <u>0</u> ft. to <u>4.0</u> ft. # of sacks used <u>1</u> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>ALFREDO PALACIOS</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____
---

13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____ Cement/Bentonite placed in well: _____ From (ft) To (ft) From (ft) To (ft) Sacks used	10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc.. _____ ft.	11) Water Level Static level _____ ft. below Date ____/____/____ Artesian Flow _____ gpm. Date ____/____/____
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15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	12) Packers Type Depth <b>N/A</b>
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16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
---

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>	Lic. No. <b>5036-M</b>
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Date <b>7/3/01</b>	Signature _____ Date _____
Licensed Driller/Pump Installer	Apprentice

**OWNER**

Attention Owner:  
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Water Well Driller/Pump Installer Program  
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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-162, B-163 & B-164**

Lat.    27    48    35    Long.    97    27    18    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started    **11/05/01**  
  
Completed    **11/05/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2	SURFACE	3.0

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other    **Hand Auger**

From (ft)	To (ft)	Description and color of formation material
0	1.2	Tan/brown SANDY CLAY
1.2	2	Tan, SILTY CLAY, CLAYEY SILT
2	3	Black/gray SANDY SILT

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from 0 ft. to 3.0 ft. # of sacks used 1  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

**11) Water Level**

**N/A**  
Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
N/A	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>Ali [Signature]</i>	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i>	Date <b>6/17/02</b>
Licensed Driller/Pump Installer	Date	Apprentice	Date

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and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b> 27   48   35	<b>Long.</b> 97   27   18	<b>Grid #</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-165</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
---	---	---------------------

<b>6) Drilling Date</b> Started <u>11/05/01</u>  Completed <u>11/05/01</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Hand Auger</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	3.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u> If Gravel Packed give the interval from _____ ft. to _____ ft.
6	.8	<b>Brown SILTY CLAY w/shells</b>	
.8	2.3	<b>Tan CLAY</b>	

Casing, Blank Pipe, and Well Screen Data			Setting (ft)		Gage Casing Screen
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	From	To	
		N/A			

<b>9) Cementing Data</b>	
Cementing from <u>0</u> ft. to <u>3.0</u> ft. # of sacks used <u>1</u>	
Method Used <u>TREMIE</u>	
Cementing By <u>CALISTRO CAMPOZANO</u>	
Distance to septic system field or other concentrated contamination _____ ft.	
Method of verification of above distance _____	

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						<b>10) Surface Completion</b> <u>N/A</u> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> <u>N/A</u> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>11) Water Level</b> <u>N/A</u> Static level _____ ft. below    Date <u>/ /</u> Artesian Flow _____ gpm.    Date <u>/ /</u>
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<b>15) Water Test</b> <u>N/A</u> Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>12) Packers</b> Type _____    Depth _____ <u>N/A</u>
--	--

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Ali...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calisto...</i> Apprentice	Date <b>6/17/02</b>



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Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-167</b>	Lat. <b>27</b> <b>48</b> <b>35</b> Long. <b>97</b> <b>27</b> <b>18</b> Grid #	5) <b>N↑</b>
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4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Hand Auger</b>
--	--

6) Drilling Date Started <b>11/05/01</b> Completed <b>11/05/01</b>	Diameter of Hole Dia. (in) From (ft) To (ft) <b>2 SURFACE 3.0</b>
--	---

From (ft)	To (ft)	Description and color of formation material
0	2	Brown sandy silt
2	3	Brown SANDY SILT

8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.				
Casing, Blank Pipe, and Well Screen Data				
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen
		N/A		

9) Cementing Data Cementing from <b>0</b> ft. to <b>3.0</b> ft. # of sacks used <b>1</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>CALISTRO CAMPOZANO</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____				
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13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>	Casing left in well: _____ Cement/Bentonite placed in well: _____			
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____	10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
---	--

15) Water Test <b>N/A</b> Type/test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	11) Water Level <b>N/A</b> Static level _____ ft. below Date <b>/ /</b> Artesian Flow _____ gpm. Date <b>/ /</b>
--	--

16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	12) Packers Type Depth <b>N/A</b>
---	--------------------------------------

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>[Signature]</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>[Signature]</i> Apprentice	Date <b>6/17/02</b>



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P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

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and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** **4) Proposed Use (check)**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-169</b></p>	<input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5) N↑</b>
---	--	--------------

**6) Drilling Date** **7) Drilling Method (check)**

Started <u>11/05/01</u>  Completed <u>11/05/01</u>	<b>Diameter of Hole</b> <table border="1" style="width:100%"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2</td> <td align="center">SURFACE</td> <td align="center">3.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2	SURFACE	3.0	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Hand Auger</u>
Dia. (in)	From (ft)	To (ft)						
2	SURFACE	3.0						

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

From (ft)	To (ft)	Description and color of formation material	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
						From	To	
0	1.5	Brown/black SANDY SILT w/shells						
1.5	3	Black mix of SAND, SILT, CLAY			N/A			

**9) Cementing Data**

Cementing from 0 ft. to 3.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By CALISTRO CAMPOZANO

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion** N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level** N/A

Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers** Type                      Depth

N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **4997-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
-----------------------------	-------------------------	-----------------	------------------

Signature <u>Ali Jamshidi</u> Licensed Driller/Pump Installer	Date <u>6/17/02</u>	Signature <u>Calistro Campozano</u> Apprentice	Date <u>6/17/02</u>
--	---------------------	---	---------------------

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

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and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-170**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/05/01**  
  
Completed **11/05/01**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>3.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Hand Auger**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>3</b>	<b>Brown, SANDY SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Cage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **CALISTRO CAMPOZANO**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

**Typetest**     Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
N/A	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **4997-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Al J...*    Date **6/17/02**    Signature *CA...*    Date **6/17/02**  
Licensed Driller/Pump Installer    Apprentice

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

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and filed with the department  
and owner within 60 days  
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**WELL REPORT**

1) OWNER										A. WELL IDENTIFICATION AND LOCATION DATA														
Name <b>Encycle</b>					Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip							
2) WELL LOCATION																								
County <b>Nueces</b>					Physical Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip							
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-171</b>										Lat. <b>27</b>   <b>48</b>   <b>35</b>					Long. <b>97</b>   <b>27</b>   <b>18</b>					Grid #				
4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No										5) <b>N↑</b>														
6) Drilling Date Started <b>11/05/01</b> Completed <b>11/05/01</b>					Diameter of Hole Dia. (in)   From (ft)   To (ft) <b>2</b>   <b>SURFACE</b>   <b>4.2</b>					7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Hand Auger</b>														
From (ft)   To (ft)   Description and color of formation material <b>0</b>   <b>5</b>   <b>Shells, SILT, SAND</b> <b>5</b>   <b>3.8</b>   <b>Tan CLAY</b> <b>3.8</b>   <b>4.2</b>   <b>SILT, minor CLAY, shells</b>					8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.					Casing, Blank Pipe, and Well Screen Data														
					Dia. (in.)   New Or Used   Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial   Setting (ft) From   To   Gage Casing Screen																			
										N/A														
9) Cementing Data Cementing from <b>0</b> ft. to <b>4.2</b> ft. # of sacks used <b>1/2</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>CALISTRO CAMPOZANO</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____																								
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____ Cement/Bentonite placed in well: _____																								
From (ft)   To (ft)   From (ft)   To (ft)   Sacks used																								
14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other: _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.										10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used														
15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.										11) Water Level <b>N/A</b> Static level _____ ft. below _____ Date ____/____/____ Artesian Flow _____ gpm. Date ____/____/____														
16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____ Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No										12) Packers Type _____ Depth _____ <b>N/A</b>														
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>										Lic. No. <b>4997-M</b>														
Address <b>P.O. BOX 845</b>					City <b>FRIENDSWOOD</b>					State <b>TX</b>					Zip <b>77549</b>									
Signature <i>Alb...</i>					Date <b>6/17/02</b>					Signature					Date <b>6/17/02</b>									
Licensed Driller/Pump Installer					Date					Apprentice					Date									



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**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-173**

Lat. **27** | **48** | **35**    Long. **97** | **27** | **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/05/01**  
  
Completed **11/05/01**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>3.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>.3</b>	<b>Brown clay, SILT &amp; SAND</b>
<b>.3</b>	<b>2.8</b>	<b>Tan/brown SILTY CLAY</b>
<b>2.8</b>	<b>3</b>	<b>Brown CLAYEY SILT, minor SAND</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**  
Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**

**Typetest**     Pump     Bailor     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Al. Jacome</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date <b>6/17/02</b>

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-174**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b>	<b>5)</b>
Started <u>1/15/01</u>	Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Driven	<b>N↑</b>
Completed <u>1/15/01</u>	<u>2.5</u>	<u>SURFACE</u>	<u>10.0</u>	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored	
				<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted	

<b>From (ft)</b>	<b>To (ft)</b>	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall
0	1.8	Drk. brown clay, silty clay, shell fragments	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
1.8	4	Brown/tan silty clay	If Gravel Packed give the Interval from _____ ft. to _____ ft.
4	5.5	Tan sandy silt	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>
5.5	10	Tan sand	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 10.0 ft. # of sacks used 2

ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **ALFREDO PALACIOS**

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

Distance to septic system field or other concentrated contamination: \_\_\_\_\_ ft.

Method of verification of above distance: \_\_\_\_\_

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder

Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Type/test  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_

Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Alfredo Palacios*    Date **1/23/01**    Signature \_\_\_\_\_    Date \_\_\_\_\_

Licensed Driller/Pump Installer    Apprentice

**Texas Department of License and Regulation**  
 Water Well Driller/Pump Installer Program  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Willacy</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-175**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
 If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b>	<b>5) Grid #</b>
Started <u>1/15/01</u>	<b>N7</b>
Completed <u>1/15/01</u>	

<b>7) Drilling Method (check)</b>	<b>Diameter of Hole</b>							
<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Dia. (in.)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td>2.5</td> <td>SURFACE</td> <td>12.0</td> </tr> </table>	Dia. (in.)	From (ft)	To (ft)	2.5	SURFACE	12.0	
Dia. (in.)	From (ft)	To (ft)						
2.5	SURFACE	12.0						

<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall	
<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>	
If Gravel Packed give the Interval from _____ ft. to _____ ft.	

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from 0 ft. to 12.0 ft. # of sacks used 3

\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By ALFREDO PALACIOS

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

**Attention Owner:**  
Confidentiality Privilege Notice on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
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Email address: water.well@license.state.tx.us

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**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** **4) Proposed Use (check)**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p style="text-align: center;"><b>B-176</b></p>	<input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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**6) Drilling Date** **7) Drilling Method (check)**

Started <b>1/15/01</b>	Completed <b>1/15/01</b>	Diameter of Hole <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td style="text-align: center;">2.5</td> <td style="text-align: center;">SURFACE</td> <td style="text-align: center;">10.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2.5	SURFACE	10.0	<input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
Dia. (in)	From (ft)	To (ft)							
2.5	SURFACE	10.0							

**8) Borehole Completion**     Open Hole     Straight Wall

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>Description and color of formation material</th> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">1.5</td> <td>Drk. brown silty clay</td> </tr> <tr> <td style="text-align: center;">1.5</td> <td style="text-align: center;">4.1</td> <td>Tan/brown silty clay</td> </tr> <tr> <td style="text-align: center;">4.1</td> <td style="text-align: center;">4.5</td> <td>Tan, silty clay to silty sand</td> </tr> <tr> <td style="text-align: center;">4.5</td> <td style="text-align: center;">10</td> <td>Tan, sand</td> </tr> </table>	From (ft)	To (ft)	Description and color of formation material	0	1.5	Drk. brown silty clay	1.5	4.1	Tan/brown silty clay	4.1	4.5	Tan, silty clay to silty sand	4.5	10	Tan, sand	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.
From (ft)	To (ft)	Description and color of formation material														
0	1.5	Drk. brown silty clay														
1.5	4.1	Tan/brown silty clay														
4.1	4.5	Tan, silty clay to silty sand														
4.5	10	Tan, sand														

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

**9) Cementing Data**

Cementing from **0** ft. to **10.0** ft. # of sacks used **2**  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIÉ**

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

<b>14) Typepump</b> <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
 Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**16) Water Quality** **12) Packers**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address <b>P.O. BOX 844</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i> Date <b>1/23/01</b>		Apprentice _____    Date _____	

*Alfredo Palacios*  
 Licensed Driller/Pump Installer



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**WELL REPORT**

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-178**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b>	<b>Diameter of Hole</b>	<b>7) Drilling Method (check)</b>
Started <u>1/15/01</u>	Dia. (in)    From (ft)    To (ft)	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored
Completed <u>1/15/01</u>	<u>2.5</u> <u>SURFACE</u> <u>10.0</u>	<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted
		<input checked="" type="checkbox"/> Other <u>Direct Push</u>

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion
0	4.2	Drk. brown clay/ brown clay, silty clay	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
4.2	5	Gray sand silt	If Gravel Packed give the interval from _____ ft. to _____ ft.
5	7	Gray sand	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>
7	7.4	Gray clay	Dia. (in.)    New Or Used    Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial    Setting (ft) From    To    Gage Casing Screen
7.4	10	Gray well graded sand	

**9) Cementing Data**

Cementing from 0 ft. to 10.0 ft. # of sacks used 2  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By ALFREDO PALACIOS

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well:		Cement/Bentonite placed in well:		Sacks used
From (ft)	To (ft)	From (ft)	To (ft)	

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

Typetest  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?

Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_  
N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alfredo Palacios</i>	Date <b>1/23/01</b>	Signature _____	Date ____/____/____
Licensed Driller/Pump Installer		Apprentice	

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**WELL REPORT**

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-179</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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**6) Drilling Date**

Started <b>1/15/01</b>	Completed <b>1/15/01</b>	Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2.5</b> <b>SURFACE</b> <b>10.0</b>	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
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From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall
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0	1.4	Drk. brown clay	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
1.4	5	Tan clay to silty clay	If Gravel Packed give the Interval from _____ ft. to _____ ft.
5	7	Gray silty sand to sandy silt	<b>Casing, Blank Pipe, and Well Screen Data</b> <b>N/A</b>
7	10	Tan sand	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)	From	To	Gage Casing Screen

**9) Cementing Data**

Cementing from **0** ft. to **10.0** ft. # of sacks used **2**  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **ALFREDO PALACIOS**

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Type pump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**15) Water Test**    **N/A**

Type test  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**  
 Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**  
 Signature *Alfredo Palacios*    Date **1/23/01**    Signature \_\_\_\_\_    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Licensed Driller/Pump Installer    Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

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This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

A. WELL IDENTIFICATION AND LOCATION DATA									
<b>1) OWNER</b>									
Name <b>Encycle</b>	Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>			State <b>TX</b>	Zip	
<b>2) WELL LOCATION</b>									
County <b>Nueces</b>		Physical Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>			State <b>TX</b>	Zip
<b>3) Type of Work</b>		Lat. <b>27</b>	<b>48</b>	<b>35</b>	Long. <b>97</b>	<b>27</b>	<b>18</b>	Grid #	
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B - 180</b></p>		<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic					<b>5)</b> <b>N↑</b>		
		<input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No							
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven				
Started <b>11/06/01</b>		Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>				
Completed <b>11/06/01</b>		<b>2</b>	<b>SURFACE</b>	<b>4.0</b>					
From (ft)	To (ft)	Description and color of formation material			<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall				
<b>0</b>	<b>.8</b>	<b>Tan, SANDY SILT</b>			<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.				
<b>.8</b>	<b>4</b>	<b>Brown, SILTY CLAY</b>			<b>Casing, Blank Pipe, and Well Screen Data</b>				
		Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To		Gage Casing Screen		
				<b>N/A</b>					
					<b>9) Cementing Data</b>				
					Cementing from <b>0</b> ft. to <b>4.0</b> ft. # of sacks used <b>1</b>				
					ft. to _____ ft. # of sacks used _____				
					Method Used <b>TREMIE</b>				
					Cementing By <b>CALISTRO CAMPOZANO</b>				
					Distance to septic system field or other concentrated contamination _____ ft.				
					Method of verification of above distance _____				
					<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>				
Casing left in well:		Cement/Bentonite placed in well:							
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used					
					<b>14) Typepump</b> <b>N/A</b>				
					<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____				
					Depth to pump bowls, cylinder, jet, etc., _____ ft.				
					<b>15) Water Test</b> <b>N/A</b>				
					Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.				
					<b>16) Water Quality</b>				
					Did you knowingly penetrate any strata which contain undesirable constituents?				
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?				
					Type of water _____    Depth of Strata _____				
					Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>4997-M</b>		
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>			State <b>TX</b>	Zip <b>77549</b>	
Signature <i>Ali Farouq Akhbar</i>		Date <b>6/17/02</b>		Signature <i>Calisto Campozano</i>		Date <b>/ /</b>			
Licensed Driller/Pump Installer		Date		Apprentice		Date			

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

1) OWNER										A. WELL IDENTIFICATION AND LOCATION DATA																							
Name <b>Encycle</b>					Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip																
2) WELL LOCATION																																	
County <b>Nueces</b>					Physical Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip																
3) Type of Work										4) Proposed Use (check)																							
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-181</b></p>					<b>Lat. 27 48 35 Long. 97 27 18 Grid #</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No										5) <b>N↑</b>																		
6) Drilling Date										7) Drilling Method (check)																							
Started <b>11/08/01</b>					Completed <b>11/08/01</b>					<b>Diameter of Hole</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center"><b>2</b></td> <td align="center"><b>SURFACE</b></td> <td align="center"><b>2.0</b></td> </tr> </table>					Dia. (in)	From (ft)	To (ft)	<b>2</b>	<b>SURFACE</b>	<b>2.0</b>	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>												
Dia. (in)	From (ft)	To (ft)																															
<b>2</b>	<b>SURFACE</b>	<b>2.0</b>																															
From (ft)    To (ft)    Description and color of formation material										8) Borehole Completion																							
0    .7    Tan, SAND										<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.																							
.7    2    Black, SILTY CLAY										9) Cementing Data																							
										<b>Casing, Blank Pipe, and Well Screen Data</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Dia. (in.)</th> <th rowspan="2">New Or Used</th> <th rowspan="2">Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial</th> <th colspan="2">Setting (ft)</th> <th rowspan="2">Gage Casing Screen</th> </tr> <tr> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td align="center">N/A</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	From	To			N/A			
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen																												
			From	To																													
		N/A																															
(Use reverse side of Well Owner's copy, If necessary)										10) Surface Completion																							
13) Plugged <input type="checkbox"/> Well plugged within 48 hours    N/A										Cementing from <b>0</b> ft. to <b>2.0</b> ft. # of sacks used <b>1/2</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>CALISTRO CAMPOZANO</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____																							
Casing left in well:					Cement/Bentonite placed in well:					11) Water Level																							
From (ft)		To (ft)		Sacks used		From (ft)		To (ft)		Sacks used		<b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used																					
14) Typepump										12) Packers																							
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____					<input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.					Static level _____ ft. below    Date / / Artesian Flow _____ gpm.    Date / / Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No					_____ Type    _____ Depth <b>N/A</b>																		
15) Water Test										16) Water Quality																							
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.										Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes X NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No																							
16) Water Quality										Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>																							
Address <b>P.O. BOX 845</b> City <b>FRIENDSWOOD</b> State <b>TX</b> Zip <b>77549</b>										Lic. No. <b>4997-M</b>																							
Signature <i>[Signature]</i>					Date <b>6/17/02</b>					Signature <i>[Signature]</i>					Date																		
Licensed Driller/Pump Installer										Apprentice																							

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	<b>Lat.</b> 27   48   35	<b>Long.</b> 97   27   18	<b>Grid #</b>
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-182</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
---	---	--------------

<b>6) Drilling Date</b> Started <u>11/06/01</u>  Completed <u>11/06/01</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	3.0	

From (ft)    To (ft)    Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0                  3 <b>Tan, CLAYEY SILT</b>	If Gravel Packed give the interval from _____ ft. to _____ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

(Use reverse side of Well Owner's copy, if necessary)	<b>9) Cementing Data</b>
	Cementing from <u>0</u> ft. to <u>3.0</u> ft. # of sacks used <u>1</u> _____ ft. to _____ ft. # of sacks used _____
	Method Used <u>TREMIE</u> Cementing By <u>CALISTRO CAMPOZANO</u> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours    N/A Casing left in well: _____    Cement/Bentonite placed in well: _____	<b>10) Surface Completion</b> N/A <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used										
<table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						<b>11) Water Level</b> N/A Static level _____ ft. below    Date <u>/</u> / <u>/</u> Artesian Flow _____ gpm.    Date <u>/</u> / <u>/</u>
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> N/A <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>12) Packers</b> Type _____    Depth _____ N/A
--	---

<b>15) Water Test</b> N/A Typetest <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.
---

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Al. Francisco</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date <b>6/17/02</b>

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

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and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-183**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/06/01**  
Completed **11/06/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>3.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>.5</b>	<b>Tan SILTY SAND</b>
<b>.5</b>	<b>3</b>	<b>Tan, SILTY CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**    **N/A**

Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Abi J...</i>	Date <b>6/17/02</b>	Signature <i>Calistro Campo...</i>	Date <b>6/17/02</b>
Licensed Driller/Pump Installer	Date	Apprentice	Date

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Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work** Lat. **27 48 35** Long. **97 27 18** Grid #

New Well  Deepening  
 Reconditioning  
**B-184 & B-185**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
 If Public Supply well, were plans submitted to the TNRCC?  Yes  No

<b>6) Drilling Date</b> Started <b>11/06/01</b>  Completed <b>11/06/01</b>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Hand Auger</b>
	Dia. (in)	From (ft)	To (ft)	
	<b>2</b>	<b>SURFACE</b>	<b>3.0</b>	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>
0	.6	<b>Brown SILTY SAND</b>	
.6	3	<b>Brown /tan CLAY</b>	

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
 Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **CALISTRO CAMPOZANO**  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion** **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump** **N/A**  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** **N/A**  
 Type test  Pump  Bailer  Jetted  Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level** **N/A**  
 Static level \_\_\_\_\_ ft. below \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers** Type \_\_\_\_\_ Depth \_\_\_\_\_  
**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **4997-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Ali J. ...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date <b>6/17/02</b>

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

<b>1) OWNER</b>	Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b>	Lat. <b>27</b>   <b>48</b>   <b>35</b>	Long. <b>97</b>   <b>27</b>   <b>18</b>	Grid #
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<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-186 &amp; B-187</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
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<b>6) Drilling Date</b> Started <u>11/06/01</u>  Completed <u>11/06/01</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	14.0	

From (ft)	To (ft)	Description and color of formation material
0	.5	<b>Gravel fill material</b>
.5	11.7	<b>Brown, SILTY CLAY</b>
11.7	14	<b>Tan/brown SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
 If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
 Cementing from 0 ft. to 14.0 ft. # of sacks used 1 1/2  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By CALISTRO CAMPOZANO  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    N/A  
 Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**    N/A  
 Type test  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth  
 N/A

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>4997-M</b>		
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>		State <b>TX</b>	Zip <b>77549</b>
Signature <i>Alb. Francisco Cabell</i>	Date <b>6/17/02</b>	Signature <b>Apprentice</b>	Date <b>6/17/02</b>		
Licensed Driller/Pump Installer			Apprentice		

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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

- New Well     Deepening  
 Reconditioning

**B-188**

Lat. **27** | **48** | **35** Long. **97** | **27** | **18** Grid #

- 4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/06/01**

Completed **11/06/01**

**Diameter of Hole**

Dia. (in)    From (ft)    To (ft)

**2**    **SURFACE**    **12.0**

**7) Drilling Method (check)**

- Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>11</b>	<b>Brown SILTY CLAY</b>
<b>11</b>	<b>12</b>	<b>Tan/brown SILT, some very fine SAND</b>

- 8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **12.0** ft. # of sacks used **1 1/2**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIÉ**

Cementing By **CALISTRO CAMPOZANO**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**

- Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

**N/A**

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**N/A**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**

**N/A**

- Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**

**N/A**

Static level \_\_\_\_\_ ft. below \_\_\_\_\_ Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm. Date **/ /**

**12) Packers**

Type    Depth

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**

Lic. No. **4997-M**

Address **P.O. BOX 845**

City **FRIENDSWOOD**

State **TX**

Zip **77549**

Signature

*[Signature]*  
Licensed Driller/Pump Installer

**6/17/02**

Date

Signature

*[Signature]*  
Apprentice

**6/17/02**

Date

Attention Owner:  
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on reverse side of owner's copy.

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Water Well Driller/Pump Installer Program  
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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-189**

Lat. **27**    **48**    **35**    Long. **97**    **27**    **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/06/01**  
Completed **11/06/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>12.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>2.3</b>	<b>Brown/black SILTY CLAY</b>
<b>2.3</b>	<b>8.3</b>	<b>Tan SILTY CLAY</b>
<b>8.3</b>	<b>12</b>	<b>Tan SILTY SAND</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **12.0** ft. # of sacks used **1 1/2**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_    **N/A**  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**

Typetest  Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Ali J...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campo...</i> Apprentice	Date <b>6/17/02</b>



Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

1) OWNER									
A. WELL IDENTIFICATION AND LOCATION DATA									
Name	Address			City			State	Zip	
Encycle	5300 Up River Road			Corpus Christi			TX		
2) WELL LOCATION									
County	Physical Address			City			State	Zip	
Nueces	5300 Up River Road			Corpus Christi			TX		
3) Type of Work									
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening		<input type="checkbox"/> Reconditioning		B-191		5) N↑			
4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic									
<input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell									
If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No									
6) Drilling Date									
Started		11/07/01		Diameter of Hole			7) Drilling Method (check) <input type="checkbox"/> Driven		
Completed		11/07/01		Dia. (in)		From (ft)		To (ft)	
				2		SURFACE		12.0	
7) Drilling Method (check) <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored									
<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted									
<input checked="" type="checkbox"/> Other <u>Direct Push</u>									
8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall									
<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>									
If Gravel Packed give the interval from _____ ft. to _____ ft.									
Casing, Blank Pipe, and Well Screen Data									
From (ft)		To (ft)		Description and color of formation material		Dia. (in.)		New Or Used	
0		1		Drk. brown CLAY				Steel, Plastic, etc.	
1		8		Tan SILTY CLAY, minor SAND				Perf., Slotted, etc.	
8		12		Tan/orange CLAY				Screen Mfg., if commercial	
								Setting (ft)	
								From To	
								Gage Casing Screen	
								N/A	
9) Cementing Data									
Cementing from <u>0</u> ft. to <u>12.0</u> ft. # of sacks used <u>1 1/2</u>									
_____ ft. to _____ ft. # of sacks used _____									
Method Used <u>TREMIE</u>									
Cementing By <u>CALISTRO CAMPOZANO</u>									
Distance to septic system field or other concentrated contamination _____ ft.									
Method of verification of above distance _____									
10) Surface Completion <u>N/A</u>									
<input type="checkbox"/> Specified Surface Slab Installed									
<input type="checkbox"/> Specified Surface Sleeve Installed									
<input type="checkbox"/> Pitless Adapter Used									
<input type="checkbox"/> Approved Alternative Procedure Used									
11) Water Level <u>N/A</u>									
Static level _____ ft. below Date <u>/ /</u>									
Artesian Flow _____ gpm. Date <u>/ /</u>									
12) Packers Type Depth									
N/A									
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <u>N/A</u>									
Casing left in well:					Cement/Bentonite placed in well:				
From (ft)		To (ft)		From (ft)		To (ft)		Sacks used	
14) Typepump <u>N/A</u>									
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder									
<input type="checkbox"/> Other _____									
Depth to pump bowls, cylinder, jet, etc., _____ ft.									
15) Water Test <u>N/A</u>									
Typepump <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated									
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.									
16) Water Quality									
Did you knowingly penetrate any strata which contain undesirable constituents?									
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?									
Type of water _____ Depth of Strata _____									
Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Company or Individual's Name (type or print) <u>BEST DRILLING SERVICES, INC.</u>							Lic. No. <u>4997-M</u>		
Address <u>P.O. BOX 845</u>				City <u>FRIENDSWOOD</u>			State <u>TX</u>	Zip <u>77549</u>	
Signature <u>Ali Trangel</u>		Date <u>6/17/02</u>		Signature <u>CRISTO CAMPOZANO</u>		Date <u>6/17/02</u>			
Licensed Driller/Pump Installer				Apprentice					

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upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-192**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/07/01**  
Completed **11/07/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>12.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1.1</b>	<b>Drk. brown SILTY CLAY</b>
<b>1.1</b>	<b>10</b>	<b>Lt. brown SILTY CLAY</b>
<b>10</b>	<b>12</b>	<b>Tan CLAYEY SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **12.0** ft. # of sacks used **1 1/2**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**

**Typestest**     Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Ali J. ...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date <b>6/17/02</b>

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us

**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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<b>3) Type of Work</b> <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-193</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
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<b>6) Drilling Date</b> Started <b>11/07/01</b>  Completed <b>11/07/01</b>	<b>Diameter of Hole</b> <table border="1" style="width:100%"> <tr> <th>Dia. (in)</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td align="center">2</td> <td align="center">SURFACE</td> <td align="center">12.0</td> </tr> </table>	Dia. (in)	From (ft)	To (ft)	2	SURFACE	12.0	<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
Dia. (in)	From (ft)	To (ft)						
2	SURFACE	12.0						

<table border="1" style="width:100%"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>Description and color of formation material</th> </tr> <tr> <td align="center">0</td> <td align="center">.4</td> <td><b>Shells, SILT</b></td> </tr> <tr> <td align="center">.4</td> <td align="center">7.5</td> <td><b>Tan SILTY CLAY</b></td> </tr> <tr> <td align="center">7.5</td> <td align="center">11</td> <td><b>Green SILTY CLAY</b></td> </tr> </table>	From (ft)	To (ft)	Description and color of formation material	0	.4	<b>Shells, SILT</b>	.4	7.5	<b>Tan SILTY CLAY</b>	7.5	11	<b>Green SILTY CLAY</b>	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.
From (ft)	To (ft)	Description and color of formation material											
0	.4	<b>Shells, SILT</b>											
.4	7.5	<b>Tan SILTY CLAY</b>											
7.5	11	<b>Green SILTY CLAY</b>											

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
 Cementing from 0 ft. to 12.0 ft. # of sacks used 1 1/2  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **CALISTRO CAMPOZANO**  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**  
 Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**  
 Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **4997-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature <i>Alb. Trevino</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature _____ Apprentice	Date <b>6/17/02</b>
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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-195**

Lat. **27**    **48**    **35**    Long. **97**    **27**    **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/08/01**  
  
Completed **11/08/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>14.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>1</b>	<b>Asphalt &amp; caliche fill</b>
<b>1</b>	<b>2.5</b>	<b>Tan SAND</b>
<b>2.5</b>	<b>14</b>	<b>Brown SILTY CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**

Cementing from **0** ft. to **14.0** ft. # of sacks used **1 1/2**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    **N/A**

Casing left in well:		Cement/Bentonite placed in well:		
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**

Typetest  Pump     Bailer     Jetted     Estimated    **N/A**  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>[Signature]</i>	Date <b>6/17/02</b>	Signature <i>[Signature]</i>	Date <b>6/17/02</b>
Licensed Driller/Pump Installer		Apprentice	

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Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

Lat. **27** | **48** | **35**    Long. **97** | **27** | **18**    Grid #

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/08/01**  
  
Completed **11/08/01**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>16.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>9</b>	<b>Brown SILTY CLAY</b>
<b>9</b>	<b>16.5</b>	<b>Orange CLAY</b>
<b>16.5</b>	<b>18</b>	<b>Tan SILT</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		<b>N/A</b>			

**9) Cementing Data**  
Cementing from **0** ft. to **16.0** ft. # of sacks used **2**  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    **N/A**  
Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**15) Water Test**    **N/A**  
**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type \_\_\_\_\_    Depth \_\_\_\_\_  
**N/A**

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature <i>[Signature]</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>[Signature]</i> Apprentice	Date <b>6/17/02</b>

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**WELL REPORT**

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**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning

**B-197**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

<b>6) Drilling Date</b> Started <u>11/08/01</u>  Completed <u>11/08/01</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	16.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	4.1	Brown CLAY	If Gravel Packed give the interval from _____ ft. to _____ ft. <b>Casing, Blank Pipe, and Well Screen Data</b>
4.1	8.2	Tan CLAY	
8.2	15	Orange CLAY	
15	16	Brown SILT	

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from 0 ft. to 16.0 ft. # of sacks used 2  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE

Cementing By CALISTRO CAMPOZANO

**13) Plugged**     Well plugged within 48 hours    N/A

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    N/A

Typetest  Pump     Bailer     Jetted     Estimated

Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**    N/A

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

12) Packers	Type	Depth
N/A		

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **4997-M**

Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>[Signature]</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>[Signature]</i> Apprentice	Date <b>6/17/02</b>

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**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B - 198**

Lat. <b>27</b>	<b>48</b>	<b>35</b>	Long. <b>97</b>	<b>27</b>	<b>18</b>	Grid #
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started **11/08/01**  
  
Completed **11/08/01**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>4.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
\* Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>4</b>	<b>Brown, SILTY CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from **0** ft. to **4.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**

Well plugged within 48 hours    **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft) To (ft) From (ft) To (ft) Sacks used

--	--	--	--	--

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**

Turbine     Jet     Submersible     Cylinder    **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

**11) Water Level**

**N/A**  
Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**15) Water Test**

**N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth
<b>N/A</b>	

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Ali J. ...</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date ____/____/____







Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

<b>1) OWNER</b>												
<b>A. WELL IDENTIFICATION AND LOCATION DATA</b>												
Name <b>Encycle</b>		Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>			State <b>TX</b>	Zip			
<b>2) WELL LOCATION</b>												
County <b>Nueces</b>		Physical Address <b>5300 Up River Road</b>			City <b>Corpus Christi</b>			State <b>TX</b>	Zip			
<b>3) Type of Work</b>		Lat. <b>27</b>		48		35		Long. <b>97</b>		27	18	Grid #
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B - 202</b></p>		<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No								<b>5)</b>		N↑
<b>6) Drilling Date</b>		<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven							
Started <b>11/08/01</b>		Dia. (in)	From (ft)		To (ft)		<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored	<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted	* Other <b>Hand Auger</b>			
Completed <b>11/08/01</b>		<b>2</b>	<b>SURFACE</b>		<b>2.5</b>							
From (ft)		To (ft)	Description and color of formation material									
<b>0</b>		<b>2.5</b>	<b>Tan SAND</b>									
<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall										<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>		
If Gravel Packed give the interval from _____ ft. to _____ ft.												
<b>Casing, Blank Pipe, and Well Screen Data</b>												
	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial			Setting (ft) From To		Gage Casing Screen				
			N/A									
<b>9) Cementing Data</b>												
Cementing from <b>0</b> ft. to <b>2.5</b> ft. # of sacks used <b>1/2</b>												
_____ ft. to _____ ft. # of sacks used _____												
Method Used <b>TREMIE</b>												
Cementing By <b>CALISTRO CAMPOZANO</b>												
Distance to septic system field or other concentrated contamination _____ ft.												
Method of verification of above distance _____												
<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>												
Casing left in well:		Cement/Bentonite placed in well:										
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used								
<b>14) Typepump</b> <b>N/A</b>												
<input type="checkbox"/> Turbine	<input type="checkbox"/> Jet	<input type="checkbox"/> Submersible			<input type="checkbox"/> Cylinder							
<input type="checkbox"/> Other _____												
Depth to pump bowls, cylinder, jet, etc., _____ ft.												
<b>15) Water Test</b> <b>N/A</b>												
Typepump <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated												
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.												
<b>16) Water Quality</b>												
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes X NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?												
Type of water _____ Depth of Strata _____												
Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No												
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>4997-M</b>					
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>			State <b>TX</b>	Zip <b>77549</b>				
Signature <i>[Signature]</i>		Date <b>6/17/02</b>		Signature <i>[Signature]</i>			Date <b>/ /</b>					
Licensed Driller/Pump Installer		Date		Apprentice			Date					

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Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

<b>3) Type of Work</b>	<b>Lat.</b> 27   48   35	<b>Long.</b> 97   27   18	<b>Grid #</b>
------------------------	--------------------------	---------------------------	---------------

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <p align="center"><b>B-203</b></p>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> <b>N↑</b>
---	---	---------------------

<b>6) Drilling Date</b> Started <b>11/08/01</b>  Completed <b>11/08/01</b>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	12.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft to _____ ft.
0	9.5	<b>Brown SILT, SAND, glass, rock (fill)</b>	
9.5	12	<b>Drk. brown CLAY</b>	

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**  
 Cementing from 0 ft. to 12.0 ft. # of sacks used 1 1/2  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used **TREMIE**  
 Cementing By **CALISTRO CAMPOZANO**  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____    Cement/Bentonite placed in well: _____ <table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>					From (ft)	To (ft)	From (ft)	To (ft)	Sacks used					
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used										

<b>14) Typepump</b> <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>10) Surface Completion</b> <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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<b>15) Water Test</b> <b>N/A</b> <b>Typetest</b> <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>11) Water Level</b> <b>N/A</b> Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____
---	---

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> Type    Depth <b>N/A</b>
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Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>	State <b>TX</b> Zip <b>77549</b>
Signature	Date <b>6/17/02</b>	Signature	Date <b>6/17/02</b>
Licensed Driller/Pump Installer	Date	Apprentice	Date

Attention Owner:  
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on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

1) OWNER										A. WELL IDENTIFICATION AND LOCATION DATA														
Name <b>Encycle</b>					Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>					Zip				
2) WELL LOCATION																								
County <b>Nueces</b>					Physical Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>					Zip				
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>B-204</b>					Lat. <b>27</b> <b>48</b> <b>35</b>					Long. <b>97</b> <b>27</b> <b>18</b>					Grid #					5) <b>N↑</b>				
4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No																								
6) Drilling Date Started <b>11/08/01</b> Completed <b>11/08/01</b>					Diameter of Hole Dia. (in) From (ft) To (ft) <b>2 SURFACE 14.0</b>					7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Direct Push</b>														
From (ft) To (ft) Description and color of formation material					8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from ft. to ft.					Casing, Blank Pipe, and Well Screen Data														
<b>0 7.5 Fill debris, SILT, SAND</b>										Dia. (in.) New Or Used Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial Setting (ft) From To Gage Casing Screen														
<b>7.5 11 Black/brown CLAY</b>										<b>N/A</b>														
<b>11 12 Tan CLAYEY SILT</b>																								
<b>12 14 Tan SAND</b>																								
(Use reverse side of Well Owner's copy, If necessary)										9) Cementing Data Cementing from <b>0</b> ft. to <b>14.0</b> ft. # of sacks used <b>1 1/2</b> ft. to ft. # of sacks used Method Used <b>TREMIE</b> Cementing By <b>CALISTRO CAMPOZANO</b> Distance to septic system field or other concentrated contamination ft. Method of verification of above distance														
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>					Casing left in well: Cement/Bentonite placed in well: From (ft) To (ft) From (ft) To (ft) Sacks used					10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used					11) Water Level <b>N/A</b> Static level ft. below Date / / Artesian Flow gpm. Date / /									
14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other					15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: gpm with ft. drawdown after hrs.					12) Packers Type Depth <b>N/A</b>														
16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes X NO If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water Depth of Strata Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No										Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b> Lic. No. <b>4997-M</b>														
Address <b>P.O. BOX 845</b>					City <b>FRIENDSWOOD</b>					State <b>TX</b>					Zip <b>77549</b>									
Signature <i>Al. Truog</i> Licensed Driller/Pump Installer					Date <b>6/17/02</b>					Signature <i>Calistro Campozano</i> Apprentice					Date <b>6/17/02</b>									

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**B-205 & SB134A**

Lat. <b>27</b>	<b>48</b>	<b>35</b>	Long. <b>97</b>	<b>27</b>	<b>18</b>	Grid #
<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No						

**5) N↑**

**6) Drilling Date**

Started **11/08/01**  
  
Completed **11/08/01**

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
<b>2</b>	<b>SURFACE</b>	<b>6.0</b>

**7) Drilling Method (check)**     Driven

Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Hand Auger**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>6</b>	<b>Brown SILTY CLAY</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from **0** ft. to **6.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**

Cementing By **CALISTRO CAMPOZANO**

Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.

Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**    **N/A**

Static level \_\_\_\_\_ ft. below    Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm.    Date **/ /**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes X **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type    Depth

**N/A**

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **4997-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Ali J. ...*    Date **6/17/02**    Signature *Calistro Campozano*    Date **/ /**  
Licensed Driller/Pump Installer    Apprentice

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This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name **Encycle** Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**2) WELL LOCATION**

County **NUECES** Physical Address **5300 Up River Road** City **Corpus Christi** State **TX** Zip \_\_\_\_\_

**3) Type of Work**

New Well  Deepening  
 Reconditioning  
**LITHOLOGIC 1A**

Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Grid # **83 - 13 - 4**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**6) Drilling Date**

Started **7/11/00**  
Completed **7/11/00**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
<b>2.5</b>	<b>SURFACE</b>	<b>8.0</b>

**7) Drilling Method (check)**

Driven  
 Air Rotary  Mud Rotary  Bored  
 Air Hammer  Cable Tool  Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
<b>0</b>	<b>4.1</b>	<b>Brown sandy silty clay, shells present</b>
<b>4.1</b>	<b>6</b>	<b>Tan silty sand</b>
<b>6</b>	<b>8</b>	<b>Drk. brown sandy silt</b>

**8) Borehole Completion**  Open Hole  Straight Wall  
 Under-reamed  Gravel Packed  Other **PLUGGED**  
If Gravel Packed give the Interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data** **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**13) Plugged**

Well plugged within 48 hours **N/A**  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**

Cementing from **0** ft. to **8.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**

Turbine  Jet  Submersible  Cylinder **N/A**  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**

**N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**

**N/A**  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**

Static level \_\_\_\_\_ ft. below Date **/ /**  
Artesian Flow \_\_\_\_\_ gpm. Date **/ /**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

**12) Packers**

Type	Depth
<b>N/A</b>	

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. Box 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date **7/23/01** Signature \_\_\_\_\_ Date \_\_\_\_\_  
Licensed Driller/Pump Installer Apprentice

**OWNER**

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**LITHOLOGIC 1B**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
 If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)**    **N↑**

**6) Drilling Date**

Started 7/11/00

Completed 7/11/00

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	8.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	1.2	<b>Brown silty clay</b>
1.2	4	<b>Brown silty clay w/ green blue materials</b>
4	8	<b>Saturated brown sandy silt w/ green blue Materials</b>

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
 If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**    **N/A**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	

(Use reverse side of Well Owner's copy, If necessary)

**9) Cementing Data**

Cementing from 0 ft. to 8.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used TREMIE  
 Cementing By ALFREDO PALACIOS  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**    **N/A**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    **N/A**

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc.. \_\_\_\_\_ ft.

**11) Water Level**

Static level \_\_\_\_\_ ft. below    Date   /  /    
 Artesian Flow \_\_\_\_\_ gpm.    Date   /  /  

**15) Water Test**    **N/A**

Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**    Type    Depth

**N/A**

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.**    Lic. No. **5036-M**

Address **P.O. BOX 845**    City **FRIENDSWOOD**    State **TX**    Zip **77549**

Signature *Alfredo Palacios*    Date 7/3/01    Signature \_\_\_\_\_    Date \_\_\_\_\_

Licensed Driller/Pump Installer    Apprentice    Date

OWNER

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

Email address: water.well@license.state.tx.us  
**WELL REPORT**

**1) OWNER** **A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well  Deepening  
 Reconditioning  
**LITHOLOGIC 1C**

**4) Proposed Use (check)**  Monitor  Environmental Soil Boring  Domestic  
 Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  
If Public Supply well, were plans submitted to the TNRCC?  Yes  No

**5) N↑**

<b>6) Drilling Date</b> Started <u>7/11/00</u> Completed <u>7/11/00</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Direct Push</u>
	Dia. (in)	From (ft)	To (ft)	
	2.5	SURFACE	8.0	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b>				
0	.7	Caliche, brown clay	If Gravel Packed give the Interval from _____ ft. to _____ ft.				
.7	.8	Blue green sediment	<b>Casing, Blank Pipe, and Well Screen Data</b> <u>N/A</u>				
.8	1.0	White material, flakey/powder-like	Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft) From To	Gage Casing Screen
1.0	1.4	Blue green material					
1.4	1.6	White fibrous material					
1.6	5	Mix of clay (brown) & blue green material					
5	8	Saturated brown clayey silt					

**9) Cementing Data**  
Cementing from 0 ft. to 8.0 ft. # of sacks used 1  
ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIÉ**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**  Well plugged within 48 hours N/A  
Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**14) Typepump** N/A  
 Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**15) Water Test** N/A  
Type test  Pump  Bailer  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?  Yes  No

**10) Surface Completion** N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
Static level \_\_\_\_\_ ft. below Date / /  
Artesian Flow \_\_\_\_\_ gpm. Date / /

**12) Packers** Type \_\_\_\_\_ Depth \_\_\_\_\_  
N/A

Company or Individual's Name (type or print) **BEST DRILLING SERVICES, INC.** Lic. No. **5036-M**  
Address **P.O. BOX 845** City **FRIENDSWOOD** State **TX** Zip **77549**  
Signature *Alfredo Palacios* Date 7/23/01 Signature \_\_\_\_\_ Date \_\_\_\_\_  
Licensed Driller/Pump Installer Apprentice

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER**

**A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>NUECES</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**LITHOLOGIC 2A**

Lat.	Long.	Grid # <b>83 - 13 - 4</b>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5) N↑**

**6) Drilling Date**

Started 7/11/00  
Completed 7/11/00

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2.5	SURFACE	6.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other Direct Push

From (ft)	To (ft)	Description and color of formation material
0	2.5	Brown silty clay w/rocks & shells
2.5	3.7	Tan clay
3.7	5	Gray to drk. gray sandy silt to silt
5	6.0	Grayish sand

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**

If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Casing, Blank Pipe, and Well Screen Data					N/A	
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen	
			From	To		

**13) Plugged**     Well plugged within 48 hours    **N/A**

Casing left in well:					Cement/Bentonite placed in well:				
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used	From (ft)	To (ft)	Sacks used	From (ft)	To (ft)

**9) Cementing Data**  
Cementing from 0 ft. to 6.0 ft. # of sacks used 1  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_

Method Used **TREMIE**  
Cementing By **ALFREDO PALACIOS**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**14) Typepump**    **N/A**  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_

Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

**15) Water Test**    **N/A**  
Type test  Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**10) Surface Completion**    **N/A**  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**11) Water Level**  
Static level \_\_\_\_\_ ft. below    Date    /    /     
Artesian Flow \_\_\_\_\_ gpm.    Date    /    /   

**16) Water Quality**  
Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes x **NO** If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**    Type \_\_\_\_\_ Depth \_\_\_\_\_  
**N/A**

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>			Lic. No. <b>5036-M</b>		
Address <b>P.O. BOX 845</b>		City <b>FRIENDSWOOD</b>		State <b>TX</b>	Zip <b>77549</b>
Signature <i>Abel Palacios</i>		Date <b>7/13/01</b>	Signature _____		Date _____
Licensed Driller/Pump Installer		Apprentice		Date	

**OWNER**



Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

A. WELL IDENTIFICATION AND LOCATION DATA									
1) OWNER									
Name	Address			City			State		Zip
Encycle	5300 Up River Road			Corpus Christi			TX		
2) WELL LOCATION									
County	Physical Address			City			State		Zip
NUECES	5300 Up River Road			Corpus Christi			TX		
3) Type of Work		Lat.		Long.		Grid # 83 - 13 - 4			
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>LITHOLOGIC 2C</b>		4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No						5)    N↑	
6) Drilling Date		Diameter of Hole			7) Drilling Method (check)				
Started 7/11/00		Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other Direct Push				
Completed 7/11/00		2.5	SURFACE	8.0					
From (ft)	To (ft)	Description and color of formation material			8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall				
0	2	Mixture of brown/tan silty clay w/ rock & Shells			<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.				
2	4.3	Brown silty clay			Casing, Blank Pipe, and Well Screen Data    N/A				
4.3	5	Black, brown crystalline, fibrous material			Dia. (in.)	Steel, Plastic, etc. or Perforated, Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
5	8	Tan sandy silt w/lt. green material w/paper					From	To	
(Use reverse side of Well Owner's copy, if necessary)									
13) Plugged <input type="checkbox"/> Well plugged within 48 hours    N/A		9) Cementing Data							
Casing left in well:		Cement/Bentonite placed in well:			Cementing from _____ ft. to <b>8.0</b> ft. # of sacks used <b>1</b>				
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used	Method Used <b>TRENIE</b>				
					Cementing by <b>ALFREDO PALACIOS</b>				
					Distance to bottom system, field or other concentrated contamination _____ ft.				
					Method of verification of above distance _____				
14) Typepump    N/A		10) Surface Completion    N/A							
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____		<input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used							
Depth to pump bowls, cylinder, jet, etc., _____ ft.		11) Water Level							
15) Water Test    N/A		Type of water _____			Static level _____ ft. below _____ Date ____/____/____				
Type of test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated		Depth of Strata _____			Artesian flow _____ gpm. Date ____/____/____				
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.		12) Packers _____ Type _____ Depth _____							
16) Water Quality		N/A							
Did you knowingly penetrate any strata which contain undesirable constituents?									
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If yes, did you submit a REPORT OF UNDESIRABLE WATER?									
Type of water _____									
Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>5036-M</b>		
Address <b>P.O. BOX 845</b>			City <b>FRIENDSWORTH</b>			State <b>TX</b>		Zip <b>77549</b>	
Signature <i>Alfredo Palacios</i>			Date <b>7/01</b>			Signature _____		Date ____/____/____	
Licensed Driller/Pump Installer			Date			Apprentice _____		Date	

**OWNER**

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
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**3) Type of Work**  
 New Well     Deepening  
 Reconditioning  
**3A - Lithology**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell  
 If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**6) Drilling Date**  
 Started 11/05/01  
 Completed 11/05/01

Diameter of Hole		
Dia. (in)	From (ft)	To (ft)
2	SURFACE	3.0

**7) Drilling Method (check)**     Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 \* Other Hand Auger

From (ft)	To (ft)	Description and color of formation material
0	3	Tan blocky CLAY

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other PLUGGED  
 If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**13) Plugged**     Well plugged within 48 hours    N/A  
 Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**9) Cementing Data**  
 Cementing from 0 ft. to 3.0 ft. # of sacks used 1  
 \_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
 Method Used TREMIE  
 Cementing By CALISTRO CAMPOZANO  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

**14) Typepump**    N/A  
 Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**10) Surface Completion**    N/A  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**15) Water Test**    N/A  
 Typetest  Pump     Bailer     Jetted     Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**11) Water Level**    N/A  
 Static level \_\_\_\_\_ ft. below    Date / /  
 Artesian Flow \_\_\_\_\_ gpm.    Date / /

**16) Water Quality**  
 Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
 Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
N/A	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Al. Francisco</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Calistro Campozano</i> Apprentice	Date <b>6/17/02</b>

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

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Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

1) OWNER										
Name <b>Encycle</b>			Address <b>5300 Up River Road</b>				City <b>Corpus Christi</b>		State <b>TX</b>	Zip
2) WELL LOCATION										
County <b>Nueces</b>			Physical Address <b>5300 Up River Road</b>				City <b>Corpus Christi</b>		State <b>TX</b>	Zip
3) Type of Work <input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>3B - Lithology</b>			4) Proposed Use (check) <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No				5) <b>N↑</b>			
6) Drilling Date Started <b>11/05/01</b> Completed <b>11/05/01</b>			Diameter of Hole Dia. (in)    From (ft)    To (ft) <b>2            SURFACE            3.0</b>			7) Drilling Method (check) <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Hand Auger</b>				
From (ft)    To (ft)    Description and color of formation material <b>0            2.8            Tan CLAY</b> <b>2.8            3            Debris - green material</b>			8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.							
Casing, Blank Pipe, and Well Screen Data										
					Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft) From    To	Gage Casing Screen
							N/A			
9) Cementing Data Cementing from <b>0</b> ft. to <b>3.0</b> ft. # of sacks used <b>1</b> _____ ft. to _____ ft. # of sacks used _____ Method Used <b>TREMIE</b> Cementing By <b>CALISTRO CAMPOZANO</b> Distance to septic system field or other concentrated contamination _____ ft. Method of verification of above distance _____										
13) Plugged <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b> Casing left in well: _____    Cement/Bentonite placed in well: _____										
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						
14) Typepump <b>N/A</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.										
15) Water Test <b>N/A</b> Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.										
16) Water Quality Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No										
10) Surface Completion <b>N/A</b> <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used							11) Water Level <b>N/A</b> Static level _____ ft. below    Date ____/____/____ Artesian Flow _____ gpm.    Date ____/____/____			
12) Packers    Type    Depth <b>N/A</b>										
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>							Lic. No. <b>4997-M</b>			
Address <b>P.O. BOX 845</b>				City <b>FRIENDSWOOD</b>			State <b>TX</b>	Zip <b>77549</b>		
Signature <i>Al. Francisco</i> Licensed Driller/Pump Installer			Date <b>6/17/02</b>		Signature <i>Calistro Campozano</i> Apprentice			Date <b>6/17/02</b>		

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

<b>1) OWNER</b>										<b>A. WELL IDENTIFICATION AND LOCATION DATA</b>										
Name <b>Encycle</b>					Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip			
<b>2) WELL LOCATION</b>																				
County <b>Nueces</b>					Physical Address <b>5300 Up River Road</b>					City <b>Corpus Christi</b>					State <b>TX</b>		Zip			
<b>3) Type of Work</b>					Lat. <b>27</b>   <b>48</b>   <b>35</b>					Long. <b>97</b>   <b>27</b>   <b>18</b>					Grid #					
<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>3C - Lithology</b>					<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No					5) <b>N↑</b>										
<b>6) Drilling Date</b>					<b>Diameter of Hole</b>					<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven										
Started <b>11/05/01</b>					Dia. (in)		From (ft)		To (ft)		<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <b>Hand Auger</b>									
Completed <b>11/05/01</b>					<b>2</b>		<b>SURFACE</b>		<b>2.5</b>											
From (ft)    To (ft)    Description and color of formation material					<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall															
<b>0</b> <b>2.5</b> <b>Mix CLAY, SILT, SAND, shells</b>					<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <b>PLUGGED</b> If Gravel Packed give the interval from _____ ft. to _____ ft.															
										<b>Casing, Blank Pipe, and Well-Screen Data</b>										
					Dia. (in.)		New Or Used		Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial		Setting (ft) From    To		Gage Casing Screen							
									<b>N/A</b>											
										<b>9) Cementing Data</b>										
										Cementing from <b>0</b> ft. to <b>2.5</b> ft. # of sacks used <b>1/2</b>										
										Method Used <b>TREMIE</b>										
										Cementing By <b>CALISTRO CAMPOZANO</b>										
										Distance to septic system field or other concentrated contamination _____ ft.										
										Method of verification of above distance _____										
										<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours <b>N/A</b>										
Casing left in well:					Cement/Bentonite placed in well:															
From (ft)		To (ft)		From (ft)		To (ft)		Sacks used												
<b>14) Typepump</b> <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other <b>N/A</b>										<b>10) Surface Completion</b> <b>N/A</b>										
Depth to pump bowls, cylinder, jet, etc. _____ ft.										<input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used										
<b>15) Water Test</b> <b>N/A</b>										<b>11) Water Level</b> <b>N/A</b>										
Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated										Static level _____ ft. below    Date / /										
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.										Artesian Flow _____ gpm.    Date / /										
<b>16) Water Quality</b>										<b>12) Packers</b> Type    Depth										
Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____										<b>N/A</b>										
Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No																				
Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>										Lic. No. <b>4997-M</b>										
Address <b>P.O. BOX 845</b>					City <b>FRIENDSWOOD</b>					State <b>TX</b>		Zip <b>77549</b>								
Signature <i>Ab. Triangulakht</i>					Date <b>6/17/02</b>					Signature <i>Calistro Campozano</i>					Date / /					
Licensed Driller/Pump Installer					Date					Apprentice					Date					

Attention: Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**  
**Water Well Driller/Pump Installer Program**  
 P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
 Toll free (800) 803-9202  
 Email address: water.well@license.state.tx.us  
**WELL REPORT**

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**1) OWNER A. WELL IDENTIFICATION AND LOCATION DATA**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

<b>3) Type of Work</b>	<b>Lat.</b> 27   48   35	<b>Long.</b> 97   27   18	<b>Grid #</b>
------------------------	--------------------------	---------------------------	---------------

<input type="checkbox"/> New Well <input type="checkbox"/> Deepening <input type="checkbox"/> Reconditioning <b>4A - Lithology</b>	<b>4) Proposed Use (check)</b> <input type="checkbox"/> Monitor <input checked="" type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell If Public Supply well, were plans submitted to the TNRCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>5)</b> N↑
--	---	--------------

<b>6) Drilling Date</b> Started <u>11/05/01</u>  Completed <u>11/05/01</u>	<b>Diameter of Hole</b>			<b>7) Drilling Method (check)</b> <input type="checkbox"/> Driven <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <u>Hand Auger</u>
	Dia. (in)	From (ft)	To (ft)	
	2	SURFACE	3.2	

From (ft)	To (ft)	Description and color of formation material	<b>8) Borehole Completion</b> <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>PLUGGED</u>
0	3	Tan/brown SANDY SILT	If Gravel Packed give the interval from _____ ft. to _____ ft.
3	3.2	Mixed debris & SILT	

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

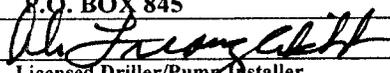
<b>9) Cementing Data</b>	
Cementing from <u>0</u> ft. to <u>3.2</u> ft. # of sacks used <u>1</u>	
Method Used <u>TREMIE</u>	
Cementing By <u>CALISTRO CAMPOZANO</u>	
Distance to septic system field or other concentrated contamination _____ ft.	
Method of verification of above distance _____	

<b>13) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours    N/A Casing left in well: _____    Cement/Bentonite placed in well: _____	<b>10) Surface Completion</b> N/A <input type="checkbox"/> Specified Surface Slab Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used										
<table border="1"> <tr> <th>From (ft)</th> <th>To (ft)</th> <th>From (ft)</th> <th>To (ft)</th> <th>Sacks used</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	From (ft)	To (ft)	From (ft)	To (ft)	Sacks used						<b>11) Water Level</b> N/A Static level _____ ft. below    Date <u>/ /</u> Artesian Flow _____ gpm.    Date <u>/ /</u>
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used							

<b>14) Typepump</b> N/A <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other _____ Depth to pump bowls, cylinder, jet, etc., _____ ft.	<b>12) Packers</b> Type    Depth N/A
--	---

<b>15) Water Test</b> N/A Type/test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: _____ gpm with _____ ft. drawdown after _____ hrs.	<b>16) Packers</b> Type    Depth N/A
--	---

<b>16) Water Quality</b> Did you knowingly penetrate any strata which contain undesirable constituents? <input type="checkbox"/> Yes    X NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER? Type of water _____    Depth of Strata _____ Was a chemical analysis made? <input type="checkbox"/> Yes <input type="checkbox"/> No
---

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>R.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature 	Date <b>6/17/02</b>	Signature <b>Apprentice</b>	Date <b>6/17/02</b>
Licensed Driller/Pump Installer		Apprentice	

Attention Owner:  
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**Texas Department of License and Regulation**  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8616  
Toll free (800) 803-9202  
Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>Encycle</b>	Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
------------------------	--------------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5300 Up River Road</b>	City <b>Corpus Christi</b>	State <b>TX</b>	Zip
-------------------------	---	-------------------------------	--------------------	-----

**3) Type of Work**

New Well     Deepening  
 Reconditioning  
**4B - Lithology**

**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic  
 Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

If Public Supply well, were plans submitted to the TNRCC?     Yes     No

**5)**    N↑

**6) Drilling Date**

Started **11/05/01**  
  
Completed **11/05/01**

**Diameter of Hole**

Dia. (in)	From (ft)	To (ft)
2	SURFACE	3.0

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other **Direct Push**

From (ft)	To (ft)	Description and color of formation material
0	3	Tan mix of CLAY & SAND

**8) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other **PLUGGED**  
If Gravel Packed give the interval from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
		N/A			

**9) Cementing Data**

Cementing from **0** ft. to **3.0** ft. # of sacks used **1**  
\_\_\_\_\_ ft. to \_\_\_\_\_ ft. # of sacks used \_\_\_\_\_  
Method Used **TREMIE**  
Cementing By **CALISTRO CAMPOZANO**  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**

Well plugged within 48 hours    N/A  
Casing left in well: \_\_\_\_\_    Cement/Bentonite placed in well: \_\_\_\_\_  
From (ft)    To (ft)    From (ft)    To (ft)    Sacks used

**10) Surface Completion**    N/A

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Typepump**    N/A

Turbine     Jet     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet, etc., \_\_\_\_\_ ft.

**11) Water Level**    N/A

Static level \_\_\_\_\_ ft. below    Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**15) Water Test**    N/A

**Typetest**     Pump     Bailer     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate any strata which contain undesirable constituents?  
 Yes    X NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER?  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made?     Yes     No

**12) Packers**

Type	Depth
N/A	

Company or Individual's Name (type or print) <b>BEST DRILLING SERVICES, INC.</b>		Lic. No. <b>4997-M</b>	
Address <b>P.O. BOX 845</b>	City <b>FRIENDSWOOD</b>	State <b>TX</b>	Zip <b>77549</b>
Signature <i>Wh. Tringebell</i> Licensed Driller/Pump Installer	Date <b>6/17/02</b>	Signature <i>Cal. Castro</i> Apprentice	Date _____



**APPENDIX C**

44

ARCADIS

**Appendix C**

Monitor Well Completion Diagrams

# WELL LOG

MW-11  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 26, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-9'  
CASING

2" PVC; SLOTTED 9-24'  
SCREEN

0-5'  
CEMENT

5-7'  
BENTONITE

7-24'  
SAND PACK

---/25.98'  
GROUND ELEV./TOP OF CASING ELEV.

CT - CUTTINGS    ▽    HC LEVEL  
SB - SPLIT BARREL(5')    ▼    WATER LEVEL  
SS - SPLIT SPOON (2')

 SAND  
 SILT  
 CLAY  
 FILL/CONCRETE  
 BENTONITE  
 GRAVEL

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
0-4'	Moderate brown, silty clay (CL).		
4-8'	Very pale gray to brownish gray, silty clay (CL).		
8-10'	Very pale orange, silty clay (CL).		
10-14'	Very pale olive, silty clay (CL).		
14-16'	Pale dusky yellow, silty clay (CL).		
16-20'	Very pale grayish orange/tan, clayey silt (ML).		
20-22'	Very pale grayish orange/tan, clay (CL) with interbedded light gray sand/silt stringers.		
22-23.5'	Light gray, sand (SP), very fine grained, saturated.		
23.5-24'	Very pale orange to light bluish gray, clay (CL).		

Total depth = 24 feet.



# WELL LOG

MW-12  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

DECEMBER 19, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-10'  
CASING

2" PVC; SLOTTED 10-30'  
SCREEN

CEMENT 0-6'

BENTONITE 6-8'

SAND PACK 8-30'

---/26.63'

GROUND ELEV./TOP OF CASING ELEV.

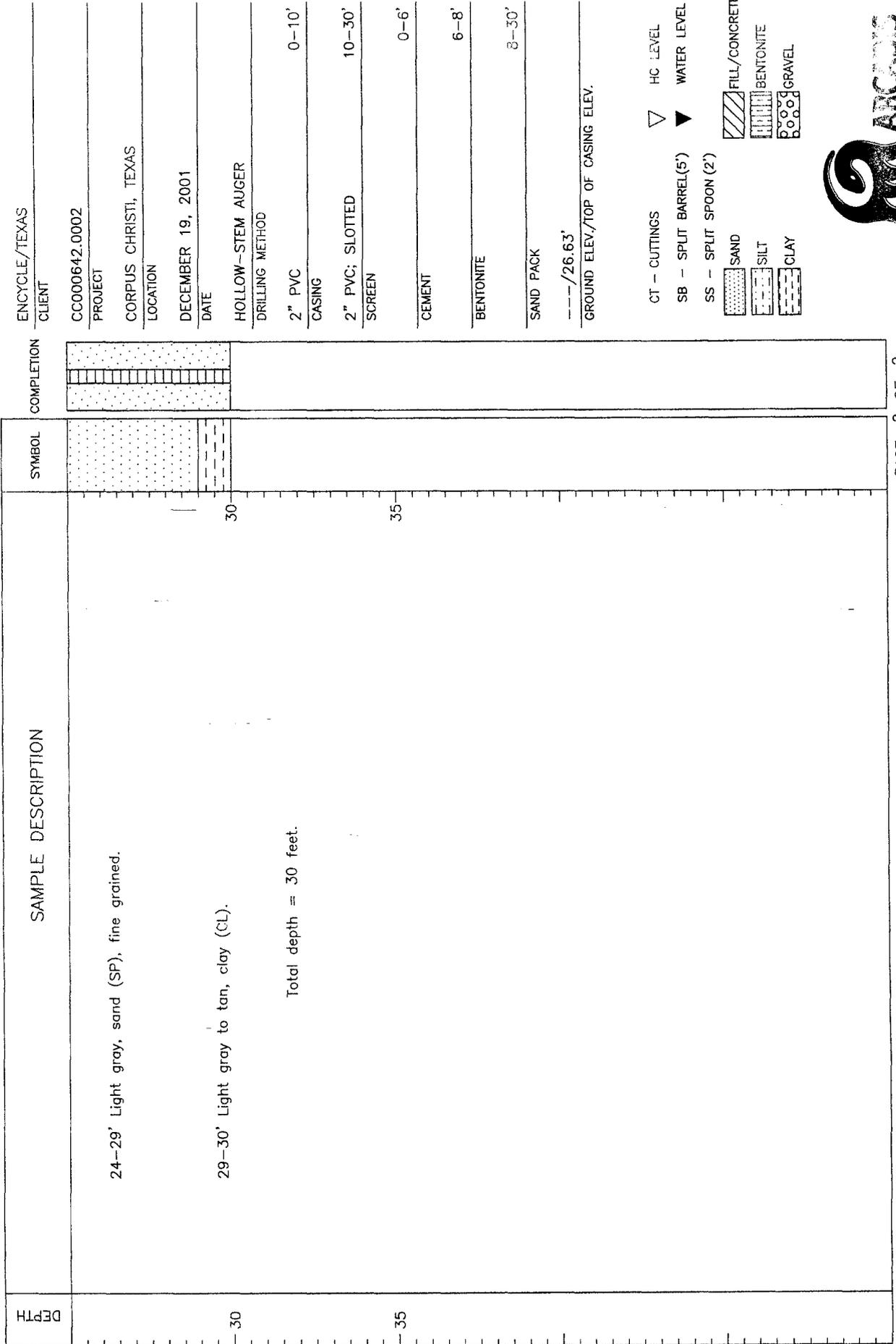
DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
0-2'	Moderately dark brown, silty clay (CL).	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
2-6'	Tan to light grayish yellow, silty clay (CL).	[Symbol: Horizontal dashed lines]	[Symbol: Diagonal lines]
6-10'	Very pale grayish orange, silty clay (CL).	[Symbol: Vertical dashed lines]	[Symbol: Diagonal lines]
10-12'	Very pale orange, clayey silt and sand (ML/SP).	[Symbol: Horizontal dashed lines]	[Symbol: Diagonal lines]
12-13'	Very pale grayish orange, sand (SP), very fine to fine grained.	[Symbol: Vertical dashed lines]	[Symbol: Diagonal lines]
13-21'	Very pale grayish orange, silty clay (CL).	[Symbol: Horizontal dashed lines]	[Symbol: Diagonal lines]
21-24'	Light gray clayey silt (ML), some very fine to fine grained sand, saturated at 22 feet.	[Symbol: Vertical dashed lines]	[Symbol: Diagonal lines]

- CT - CUTTINGS
- SB - SPLIT BARREL(5')
- SS - SPLIT SPOON (2')
- HC LEVEL
- WATER LEVEL
- SAND
- SILT
- CLAY
- FILL/CONCRETE
- BENTONITE
- GRAVEL



**ARCADIS**

# WELL LOG



MW-12

WELL

ENCYCLE/TEXAS

CLIENT

CC000642.0002

PROJECT

CORPUS CHRISTI, TEXAS

LOCATION

DECEMBER 19, 2001

DATE

HOLLOW-STEM AUGER

DRILLING METHOD

2" PVC

CASING

0-10'

2" PVC; SLOTTED

SCREEN

10-30'

CEMENT

0-6'

BENTONITE

6-8'

SAND PACK

8-30'

---/26.63'

GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS      ▽      HC LEVEL
  - SB - SPLIT BARREL (5')      ▼      WATER LEVEL
  - SS - SPLIT SPOON (2')
- |                                   |      |                          |               |
|-----------------------------------|------|--------------------------|---------------|
| [Symbol: Dotted pattern]          | SAND | [Symbol: Diagonal lines] | FILL/CONCRETE |
| [Symbol: Horizontal dashed lines] | SILT | [Symbol: Vertical lines] | BENTONITE     |
| [Symbol: Horizontal solid lines]  | CLAY | [Symbol: Circles]        | GRAVEL        |



# WELL LOG

MW-13  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 14, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC  
CASING 0-12'

2" PVC; SLOTTED  
SCREEN 12-27'

CEMENT  
0-8'

BENTONITE  
8-10'

SAND PACK  
10-27'

---/27.47'  
GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS HC LEVEL
- SB - SPLIT BARREL(5') WATER LEVEL
- SS - SPLIT SPOON (2')
- SAND
- SILT
- CLAY
- FILL/CONCRETE
- BENTONITE
- GRAVEL

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
5	0-4' Medium dark brown, silty clay (CL), stiff.		
5	4-6' Pale brown, silty clay (CL), stiff.		
10	6-10' Very pale yellowish brown, silty clay (CL), stiff.		
10	10-14' Very pale orange, silty clay (CL), stiff.		
15	14-26.5' Very pale orange brown, clayey silt (ML), saturated at 18 feet.		
20			
25	26.5-27' Very pale olive, clay (CL).		

Total depth = 27 feet.



# WELL LOG

MW-14  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 26, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-9'  
CASING

2" PVC; SLOTTED 9-24'  
SCREEN

CEMENT 0-5'

BENTONITE 5-7'

SAND PACK 7-24'

---/27.14'  
GROUND ELEV./TOP OF CASING ELEV.

CT - CUTTINGS ▽ HC LEVEL  
SB - SPLIT BARREL(5') ▼ WATER LEVEL  
SS - SPLIT SPOON (2')  
SAND [diagonal lines] FILL/CONCRETE  
SILT [horizontal lines] BENTONITE  
CLAY [dotted] GRAVEL [circles]

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
0-2'	Moderate dark brown, silty clay (CL).	[diagonal lines]	[diagonal lines]
2-8'	Very pale light gray/tan, silty clay (CL).	[horizontal lines]	[horizontal lines]
8-14'	Very pale grayish orange/tan, silty clay (CL).	[dotted]	[dotted]
14-20'	Very pale grayish orange/tan, silt (ML).	[dotted]	[dotted]
20-23.5'	Very pale grayish orange/tan, sand (SP), very fine grained, saturated.	[dotted]	[dotted]
23.5-24'	Very pale olive clay (CL).	[dotted]	[dotted]

Total depth = 24 feet.



# WELL LOG

MW-15  
WELL

DEPTH

SAMPLE DESCRIPTION

SYMBOL

COMPLETION

0-0.5' Loose gravel fill.

0.5-1' Pale brown, silty clay (CL).

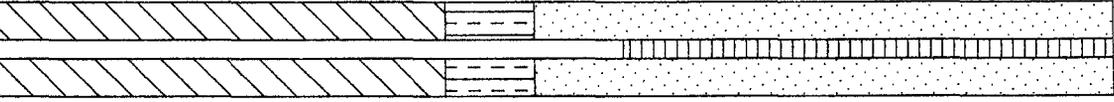
1-8' Very pale orange/tan, silty clay (CL).

8-14' Very pale olive, clayey silt (ML).

14-17' Dusky yellow, silt (ML).

17-18' Pale olive, silty sand (SM), very fine grained, saturated at 17 feet.

18-27' Pale olive, sand (SP), very fine to fine grained.



ENCYCLE/TEXAS  
CLIENT

CC000642.0002

PROJECT

CORPUS CHRISTI, TEXAS

LOCATION

NOVEMBER 19, 2001

DATE

HOLLOW-STEM AUGER

DRILLING METHOD

2" PVC

CASING

2" PVC; SLOTTED

SCREEN

CEMENT

BENTONITE

SAND PACK

---/22.71'

GROUND ELEV./TOP OF CASING ELEV.

CT - CUTTINGS



HC LEVEL

SB - SPLIT BARREL (5')



WATER LEVEL

SS - SPLIT SPOON (2')



SAND



SILT



CLAY



FILL/CONCRETE



BENTONITE



GRAVEL



# WELL LOG

MW-15  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 19, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-14'  
CASING

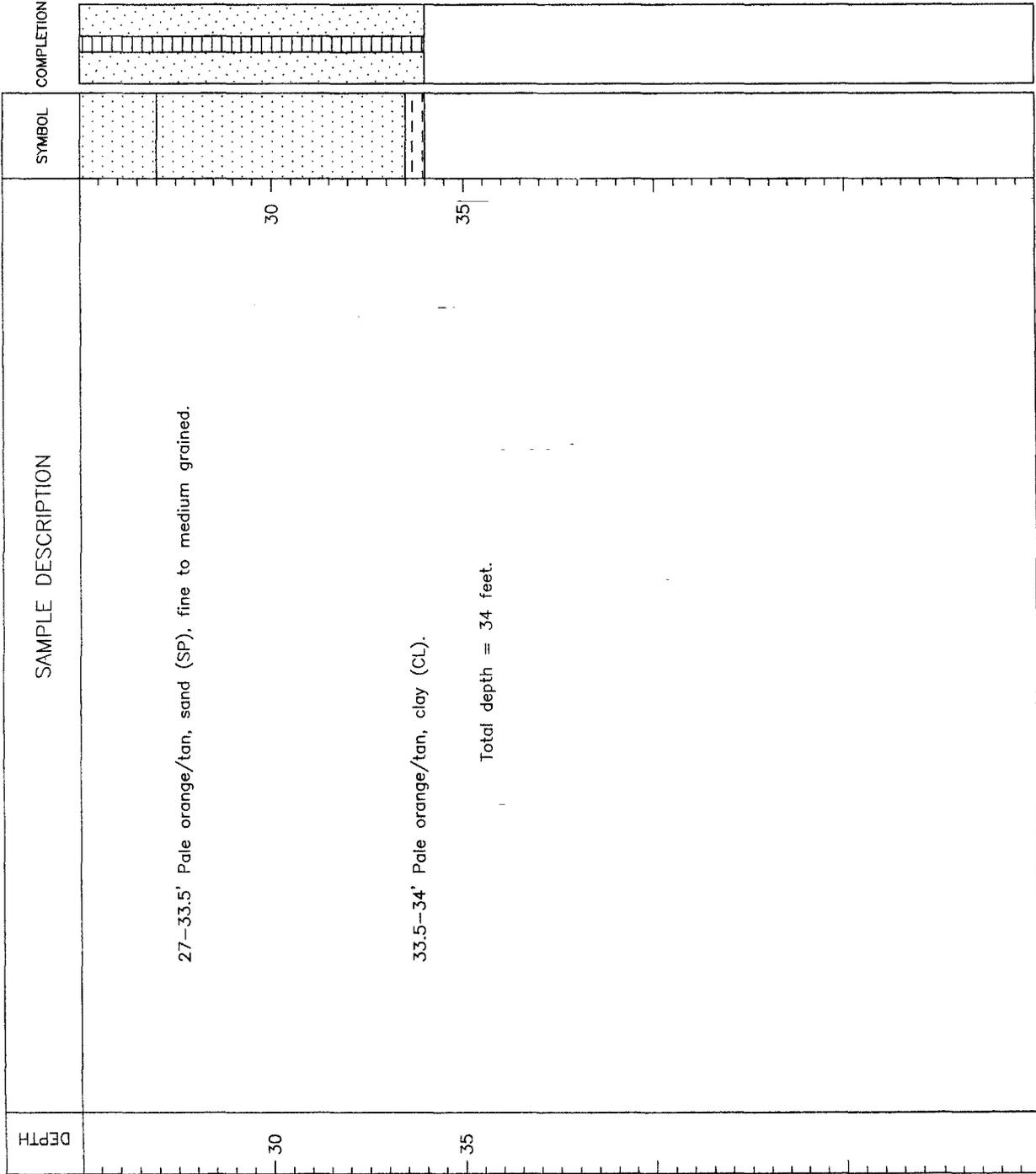
2" PVC; SLOTTED 14-34'  
SCREEN

CEMENT 0-10'

BENTONITE 10-12'

SAND PACK 12-34'

---/22.71'  
GROUND ELEV./TOP OF CASING ELEV.



- CT - CUTTINGS ▽ HC LEVEL
- SB - SPLIT BARREL(5') ▼ WATER LEVEL
- SS - SPLIT SPOON (2')
- SAND [stippled pattern]
- SILT [horizontal lines pattern]
- CLAY [vertical lines pattern]
- FILL/CONCRETE [diagonal lines pattern]
- BENTONITE [horizontal lines pattern]
- GRAVEL [stippled pattern]



# WELL LOG

MW-16  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 21, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

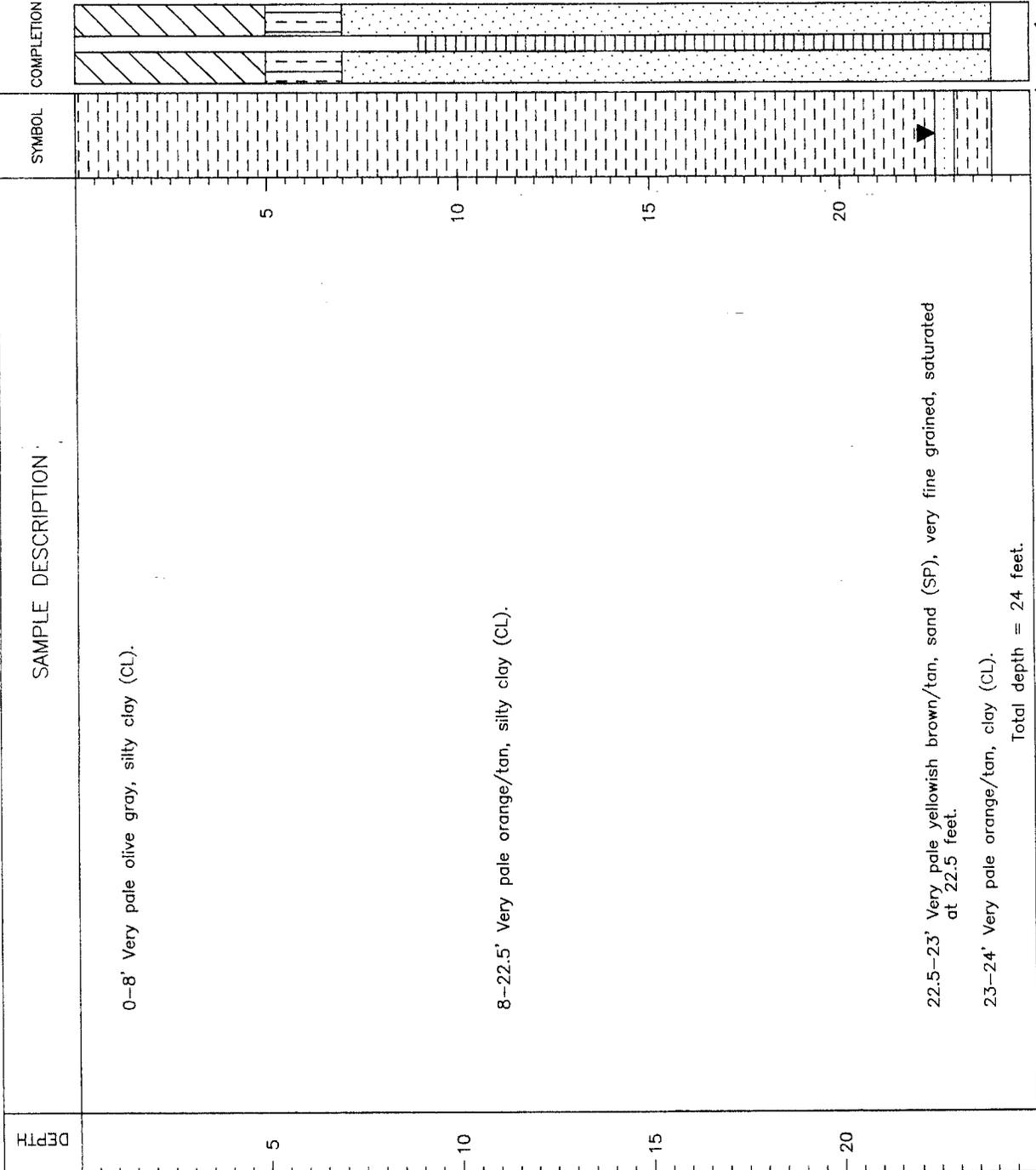
2" PVC 0-9'  
CASING

2" PVC; SLOTTED 9-24'  
SCREEN

CEMENT 0-5'  
BENTONITE 5-7'

SAND PACK 7-24'

---/27.05'  
GROUND ELEV./TOP OF CASING ELEV.



Total depth = 24 feet.

- CT - CUTTINGS
- SB - SPLIT BARREL (5')
- SS - SPLIT SPOON (2')
- SAND
- SILT
- CLAY
- HC LEVEL
- WATER LEVEL
- FILL/CONCRETE
- BENTONITE
- GRAVEL



# WELL LOG

MW-17  
WELL

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
5	0-2' Moderate grayish black, clay (CL). 2-4' Moderate greenish gray, silty clay (CL). 4-6' Very pale olive, silty clay (CL). 6-26' Very pale orange/tan, silty clay (CL).	[Symbol: Dashed pattern]	[Symbol: Diagonal lines]
10		[Symbol: Dashed pattern]	[Symbol: Diagonal lines]
15		[Symbol: Dashed pattern]	[Symbol: Diagonal lines]
20		[Symbol: Dashed pattern]	[Symbol: Diagonal lines]

ENCYCLE/TEXAS  
 CLIENT  
 CC000642.0002  
 PROJECT  
 CORPUS CHRISTI, TEXAS  
 LOCATION  
 NOVEMBER 19, 2001  
 DATE  
 HOLLOW-STEM AUGER  
 DRILLING METHOD  
 2" PVC 0-17'  
 CASING  
 2" PVC; SLOTTED 17-37'  
 SCREEN  
 CEMENT 0-13'  
 BENTONITE 13-15'  
 SAND PACK 15-37'  
 ---/26.87'  
 GROUND ELEV./TOP OF CASING ELEV.

CT - CUTTINGS    ▽ HC LEVEL  
 SB - SPLIT BARREL(5')    ▼ WATER LEVEL  
 SS - SPLIT SPOON (2')  
 SAND [Symbol: Dotted pattern]    FILL/CONCRETE [Symbol: Diagonal lines]  
 SILT [Symbol: Horizontal lines]    BENTONITE [Symbol: Vertical lines]  
 CLAY [Symbol: Stippled pattern]    GRAVEL [Symbol: Circles]



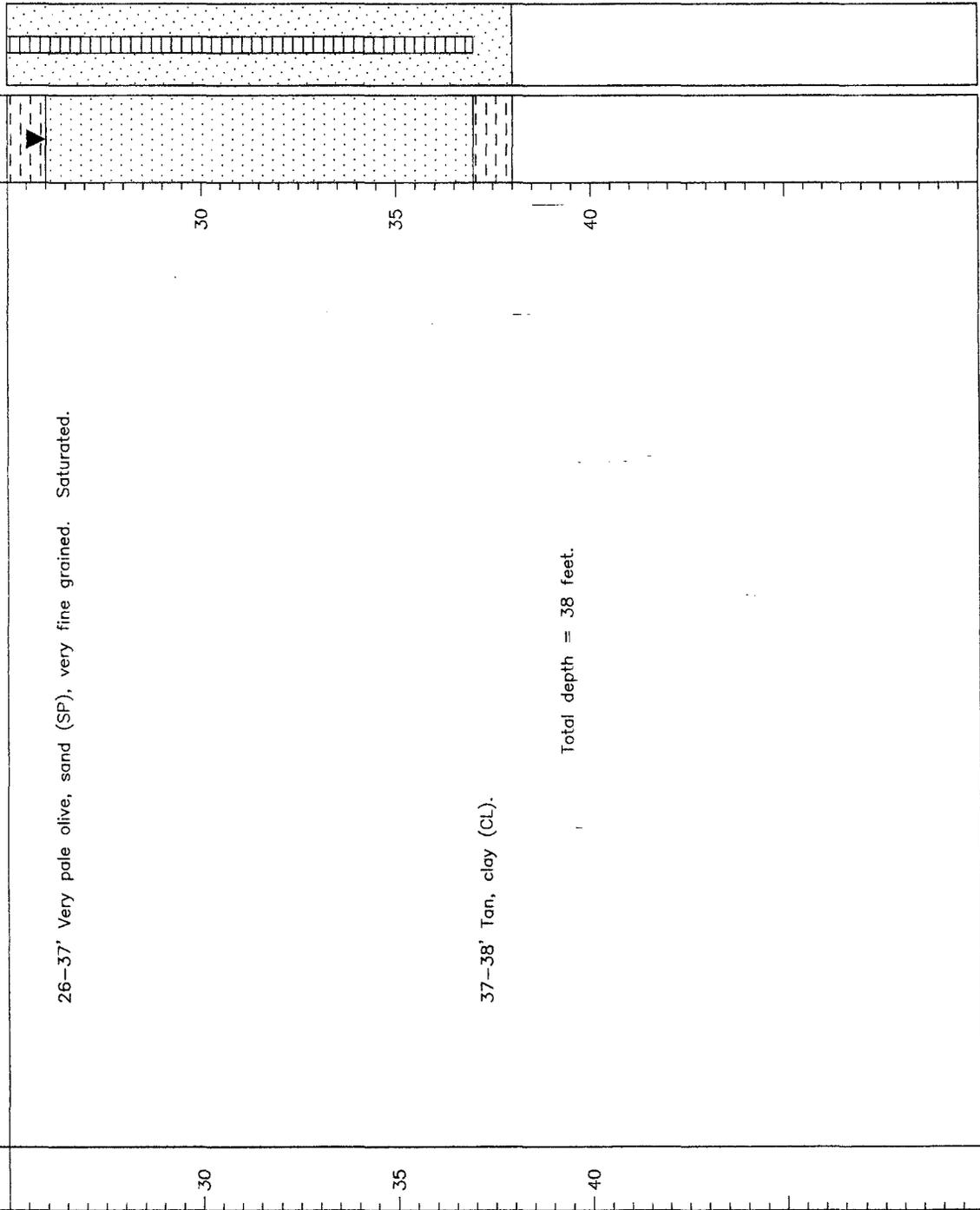
# WELL LOG

MW-17  
WELL

## SAMPLE DESCRIPTION

COMPLETION

ENCYCLE/TEXAS  
CLIENT



CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 19, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-17'  
CASING

2" PVC; SLOTTED 17-37'  
SCREEN

CEMENT 0-13'

BENTONITE 13-15'

SAND PACK 15-37'

---/26.87'  
GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS
- SB - SPLIT BARREL(5')
- SS - SPLIT SPOON (2')
- SAND
- SILT
- CLAY
- FILL/CONCRETE
- BENTONITE
- GRAVEL
- HC LEVEL
- WATER LEVEL



# WELL LOG

MW-18  
WELL

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
0-4'	Medium dark brown, sand (SP), very fine grained with abundant loose fill.	[Symbol: Dotted pattern]	[Symbol: Diagonal hatching]
4-12'	Very pale orange gray, clayey silt (ML).	[Symbol: Horizontal dashed lines]	[Symbol: Diagonal hatching]
12-28.5'	Very pale orange, sand (SP), very fine to fine grained, saturated at 18 feet.	[Symbol: Dotted pattern]	[Symbol: Diagonal hatching]
0-10'		[Symbol: Horizontal dashed lines]	[Symbol: Diagonal hatching]
10-12'		[Symbol: Horizontal dashed lines]	[Symbol: Diagonal hatching]
12-29'		[Symbol: Dotted pattern]	[Symbol: Diagonal hatching]

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 13, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC  
CASING 0-14'

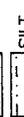
2" PVC; SLOTTED  
SCREEN 14-29'

CEMENT  
0-10'

BENTONITE  
10-12'

SAND PACK  
12-29'

---/24.01'  
GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS  HC LEVEL
- SB - SPLIT BARREL (5')  WATER LEVEL
- SS - SPLIT SPOON (2') 
-  SAND
-  SILT
-  CLAY
-  FILL/CONCRETE
-  BENTONITE
-  GRAVEL



# WELL LOG

MW-18  
WELL

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
30	28.5-29' Very pale olive, clay (CL).  Total depth = 29 feet.	[Symbol: Dotted pattern]	[Symbol: Dotted pattern]
35			

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 13, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC  
CASING

2" PVC; SLOTTED  
SCREEN

0-14'

14-29'

0-10'

10-12'

12-29'

CEMENT

BENTONITE

SAND PACK

---/24.01'

GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS
- SB - SPLIT BARREL (5')
- SS - SPLIT SPOON (2')
- SAND
- SILT
- CLAY
- HC LEVEL
- WATER LEVEL
- FILL/CONCRETE
- BENTONITE
- GRAVEL



# WELL LOG

MW-19

WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 12, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC  
CASING 0-12'

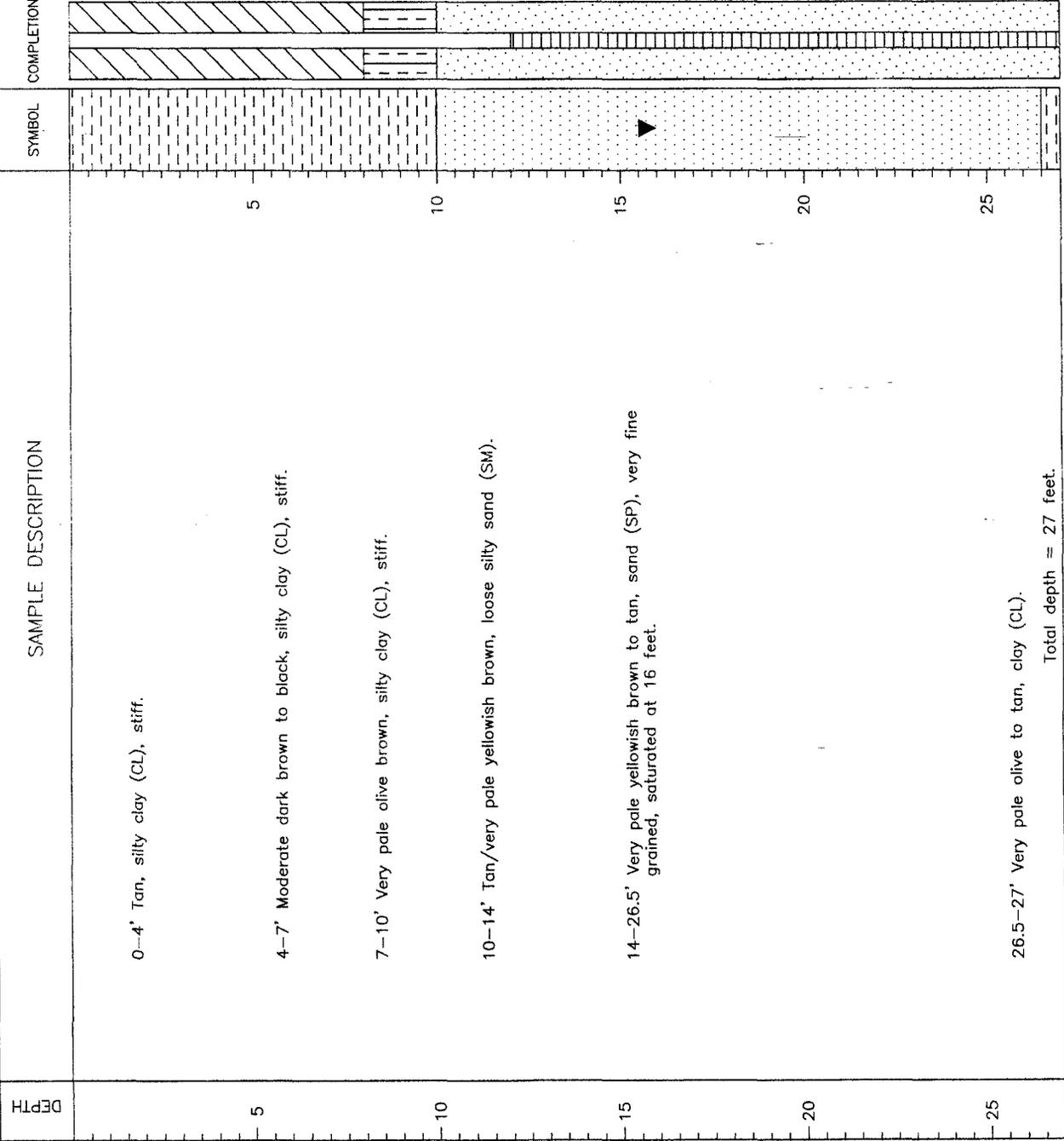
2" PVC; SLOTTED  
SCREEN 12-27'

CEMENT 0-8'

BENTONITE 8-10'

SAND PACK 10-27'

---/23.63'  
GROUND ELEV./TOP OF CASING ELEV.



CT - CUTTINGS HC LEVEL  
 SB - SPLIT BARREL(5') WATER LEVEL  
 SS - SPLIT SPOON (2')  
 SAND  
 SILT  
 CLAY  
 FILL/CONCRETE  
 BENTONITE  
 GRAVEL



Total depth = 27 feet.

# WELL LOG

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
5	0-4' Moderate brown, silty sand (ML/SM).		
10	4-6' Very pale olive gray, silty clay (CL).		
15	6-12' Very pale orange, silty clay (CL).		
20	12-16' Very pale light reddish brown, sand (SP), very fine grained.		
20	16-24' Very pale light yellowish brown, sand (SP), very fine grained, saturated at 17 feet.		

MW-20  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 20, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-15'  
CASING

2" PVC; SLOTTED 15-35'  
SCREEN

CEMENT 0-11'

BENTONITE 11-13'

SAND PACK 13-35'

---/23.82'

GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS
- SB - SPLIT BARREL (5')
- SS - SPLIT SPOON (2')
- SAND
- SILT
- CLAY
- HC LEVEL
- WATER LEVEL
- FILL/CONCRETE
- BENTONITE
- GRAVEL



# WELL LOG

MW-20  
WELL

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 20, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-15'  
CASING

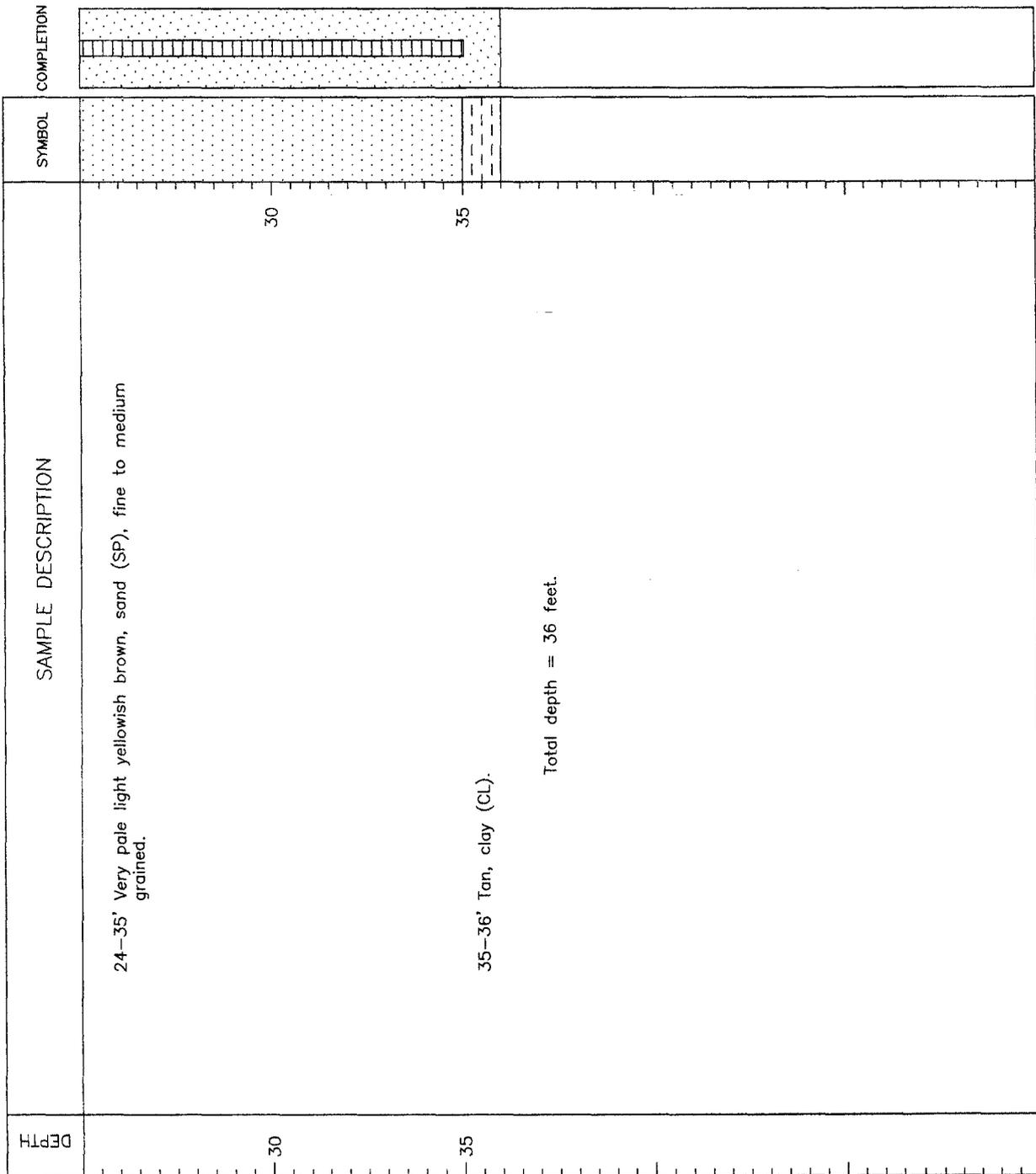
2" PVC; SLOTTED 15-35'  
SCREEN

CEMENT 0-11'  
BENTONITE

11-13'  
BENTONITE

13-35'  
SAND PACK

---/23.82'  
GROUND ELEV./TOP OF CASING ELEV.



24-35' Very pale light yellowish brown, sand (SP), fine to medium grained.

35-36' Tan, clay (CL).

Total depth = 36 feet.

- CT - CUTTINGS
- SB - SPLIT BARREL(5')
- SS - SPLIT SPOON (2')
- SAND
- SILT
- CLAY
- HC LEVEL
- WATER LEVEL
- FILL/CONCRETE
- BENTONITE
- GRAVEL



# WELL LOG

MW-21  
WELL

DEPTH	SAMPLE DESCRIPTION	SYMBOL	COMPLETION
5	0-2' Pale grayish orange, silty clay (CL).	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
5	2-4' Very pale olive to pale yellowish brown, silty clay (CL).	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
10	4-12' Pale olive, silty clay (CL).	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
15	12-14' Pale grayish orange, silty clay (CL).	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
15	14-27' Very pale grayish orange/tan, sand (SP), very fine grained, saturated at 17 feet.	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
20		[Symbol: Dotted pattern]	[Symbol: Diagonal lines]
25	27-27.5' Very pale yellow/tan, clay (CL).	[Symbol: Dotted pattern]	[Symbol: Diagonal lines]

Total depth = 27.5 feet.

ENCYCLE/TEXAS  
CLIENT

CC000642.0002  
PROJECT

CORPUS CHRISTI, TEXAS  
LOCATION

NOVEMBER 12, 2001  
DATE

HOLLOW-STEM AUGER  
DRILLING METHOD

2" PVC 0-12'  
CASING

2" PVC; SLOTTED 12-27'  
SCREEN

CEMENT 0-8'

BENTONITE 8-10'

SAND PACK 10-27'

---/23.58'  
GROUND ELEV./TOP OF CASING ELEV.

- CT - CUTTINGS ▽ HC LEVEL
  - SB - SPLIT BARREL(5') ▼ WATER LEVEL
  - SS - SPLIT SPOON (2')
- |  |      |  |               |
|--|------|--|---------------|
|  | SAND |  | FILL/CONCRETE |
|  | SILT |  | BENTONITE     |
|  | CLAY |  | GRAVEL        |



Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8618  
Toll free (800)803-9202

Email address: [water.well@license.state.tx.us](mailto:water.well@license.state.tx.us)

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

1) OWNER

Name <b>Encycle</b>	Address <b>5500 UPRIVER RD CC</b>	City <b>CC</b>	State <b>TX.</b>	Zip
------------------------	--------------------------------------	-------------------	---------------------	-----

2) WELL LOCATION

County <b>Nueces</b>	Physical Address <b>5500 UPRIVER RD. CC</b>	City <b>CC</b>	State <b>TX</b>	Zip
-------------------------	--	-------------------	--------------------	-----

3) Type of Work **MW # 11**

<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Replacement <input type="checkbox"/> Reconditioning <input type="checkbox"/> Deepening	4) Proposed Use (check) <input checked="" type="checkbox"/> Monitor <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply Environmental Soil Boring Domestic If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Grid # <b>83-12-2</b> 5) <b>NT</b>
---	--	---------------------------------------

6) Drilling Date

Started <b>11 20 01</b>	Completed <b>11 20 01</b>	Diameter of Hole <table border="1"> <tr> <th>Diameter</th> <th>From (ft)</th> <th>To (ft)</th> </tr> <tr> <td><b>8</b></td> <td><b>0</b></td> <td><b>24</b></td> </tr> </table>	Diameter	From (ft)	To (ft)	<b>8</b>	<b>0</b>	<b>24</b>	7) Drilling Method (check) <input type="checkbox"/> Air Rotary <input type="checkbox"/> Air Hammer <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Cable Tool <input type="checkbox"/> Other <b>HSA</b>
Diameter	From (ft)	To (ft)							
<b>8</b>	<b>0</b>	<b>24</b>							

From (ft) To (ft) Description and color of formation material

0-4	Clay
4-8	Silty Clay
8-10	Silty Clay
10-14	" "
14-16	" "
16-20	Clayey Silty
20-22	Clay w/ sand stringers
22-23.5	Sand wet
23.5-24	Clay

8) Borehole Completion  Open Hole  Straight Well

Under-reamed  Gravel Packed  Other **20/40**  
If Gravel Packed give the interval from **24** ft. to **7** ft.

Casing, Blank Pipe, and Well Screen Data

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial	Setting (ft)		Casing Casing Screen
			From	To	
2	N	PVC SCREEN	24	9	DIU
2	N	PVC RIGID	9	24	40/20

9) Cementing Data

Cementing from **5** ft. to **0** ft. # of sacks used **1**  
**BIS** ft. to **5** ft. # of sacks used **1**  
 Method Used **hand**  
 Cementing By **TEDE**  
 Distance to septic system field or other concentrated contamination **0** ft.  
 Method of verification of above distance \_\_\_\_\_

13) Plugged

Well plugged within 48 hours  
 Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used
				<b>NA</b>

10) Surface Completion

Specified Surface Slab installed  
 Specified Surface Sleeve installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

14) Type Pump

Turbine  Jet  Submersible  Cylinder  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet etc., \_\_\_\_\_ ft.

15) Water Test

Typetest  Pump  Baker  Jetted  Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

16) Water Quality

Did you knowingly penetrate a strata which contain undesirable constituents.  
 YES  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
 Type of water: \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made  Yes  No

11) Water Level

Static level \_\_\_\_\_ ft. below Date **11 26 01**  
 Artesian Flow \_\_\_\_\_ gpm. Date **11 26 01**

12) Packers

**X** (A) Type \_\_\_\_\_ Depth \_\_\_\_\_

Company or individual's Name (type or print)

**JONES ENU DRILLING** Lic. No. **4931M**  
 Address **1911 N. LEXINGTON BLVD** City **CC** State **TX** Zip **78409**

Signature

**Paul Darnold** Date **6 11 02** Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Licensed Driller/Pump Installer \_\_\_\_\_ Apprentice \_\_\_\_\_

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Toll free (800)803-9202

Email address: water.well@license.state.tx.us

This form must be completed and filed with the department and owner within 60 days upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <b>ENCYCLE</b>	Address <b>5500 UPRIVER RD</b>	City <b>Corpus Christi</b>	State <b>Tx</b>	Zip
------------------------	-----------------------------------	-------------------------------	--------------------	-----

**2) WELL LOCATION**

County <b>Nueces</b>	Physical Address <b>5600 UPRIVER RD</b>	City <b>Corpus Christi</b>	State <b>Tx</b>	Zip
-------------------------	--	-------------------------------	--------------------	-----

**3) Type of Work** *MW #12*

<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Replacement <input type="checkbox"/> Reconditioning <input type="checkbox"/> Deepening	<b>4) Proposed Use (check):</b> <input checked="" type="checkbox"/> Monitor <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Environmental Soil Boring Domestic Grid = <b>E3-12-2</b>
---	--	--

<b>5) Drilling Date</b> Started <u>12 19 01</u> Completed <u>12 19 01</u>	<b>Diameter of Hole</b> Diameter <u>8</u> From <u>0</u> To <u>30</u>	<b>6) Drilling Method (check)</b> <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Jet <input type="checkbox"/> Hot Hammer <input type="checkbox"/> Core <input checked="" type="checkbox"/> <b>HSA</b>
---	---	--

From (ft)	To (ft)	Description and color of formation material	7) Borehole Completion
0-2		Brown silty clay	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Well <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packag <input checked="" type="checkbox"/> Other <u>20/40</u>
2-4		Tan to grayish yellow silty clay	If Gravel Packed, give the material from <u>30</u> ft to <u>8</u> ft
6-10		" "	<b>Casing, Blank Pipe, and Well Screen Data</b>
10-12		Clayey silt & sand	<input type="checkbox"/> New <input type="checkbox"/> Steel, Plastic, etc. <input type="checkbox"/> Setting ft: <input type="checkbox"/> Casing
12-13		grayish orange sand	<input type="checkbox"/> Old <input type="checkbox"/> Perfor. Slotted, etc. <input type="checkbox"/> From <input type="checkbox"/> To <input type="checkbox"/> Screen
13-21		SILTY CLAY	<input checked="" type="checkbox"/> N PVC screen 30-10 010
24-28		sand	<input checked="" type="checkbox"/> N 10-0 40000
29-30		clay	

<b>8) Cementing Data</b> Cementing from <u>6</u> ft to <u>0</u> ft # of sacks used <u>1</u> <u>8</u> ft to <u>10</u> ft # of sacks used <u>1</u> Method Used <u>Hand</u> Cementing By <u>JFD</u> Distance to septic system field or other concentrated contamination <u>ft.</u> Method of verification of above distance
--

<b>9) Plugged</b> <input type="checkbox"/> Well plugged within 48 hours Casing left in well: Cement/Bentonite placed in well: <u>N/A</u> From (ft) To (ft) From (ft) To (ft) Sacks used	<b>10) Surface Completion</b> <input checked="" type="checkbox"/> Specified Surface Slab installed <input type="checkbox"/> Specified Surface Sleeve installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
---	---

<b>11) Water Level</b> Static level <u>82</u> ft below Date <u>12 19 01</u> Artesian Flow <u>N/A</u> gpm Date
---

<b>12) Water Quality</b> Did you knowingly penetrate a strata which contain undesirable constituents? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER Type of water _____ Depth of Strata _____ Was a chemical analysis made <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>12) Packers</b> <u>N/A</u> Type _____ Depth _____
---	--

Company or individual's Name (type or print) <u>JONES ENV. DRILLING</u> Lic. No. <u>4931M</u> Address <u>1911 N. Lexington Blvd</u> City <u>Corpus Christi</u> State <u>Tx</u> Zip <u>78409</u> Signature <u>Paul Denton</u> Date <u>6.11.02</u> Signature _____ Date _____ Licensed Driller/Pump Installer _____ Date _____ Appearance _____ Date _____
---

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

### Texas Department of License and Regulation

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616  
Toll free (800)803-9202

Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

### WELL REPORT

#### A. WELL IDENTIFICATION AND LOCATION DATA

#### 1) OWNER

Name	Address	City	State	Zip
ENCYCLE	5500 UPRIVER RD.	Corpus Christi	TX	

#### 2) WELL LOCATION

County	Physical Address	City	State	Zip
MURKERS	5500 UPRIVER	Corpus Christi	TX	

#### 3) Type of Work

<input type="checkbox"/> New Well <input type="checkbox"/> Replacement <input type="checkbox"/> Reconditioning <input type="checkbox"/> Deepening	<input checked="" type="checkbox"/> 4) Proposed Use (check) <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply	<input type="checkbox"/> Monitor <input type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> If Public Supply well, were plans submitted?	5) NT <input type="checkbox"/> Yes <input type="checkbox"/> No
--	---	--	--

#### 6) Drilling Date

Started 11 14 01  
Completed 11 14 01

#### Diameter of Hole

Dia. (in)	From (ft)	To (ft)
8	0	27

#### 7) Drilling Method (check)

Driven  
 Air Rotary  
 Mud Rotary  
 Bored  
 Air Hammer  
 Cable Tool  
 Other HSA

#### From (ft) To (ft) Description and color of formation material

0-4	Silty Clay
4-6	"
6-10	"
10-14	"
14-26.5	Playey silt unit
26.5-27	Play

#### 8) Borehole Completion

Open Hole  
 Straight Wall  
 Under-reamed  
 Gravel Packed  
 Other 20/40  
 If Gravel Packed give the interval from 27 ft to 10 ft

#### Casing, Blank Pipe, and Well Screen Data

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf. Slotted, etc. Screen Mfg. if commercial	Setting (ft)		Casing or Screen
			From	To	
2 1/2	N	PK Screen	27	12	20
2 1/2	N	PK R. 2nd	12	0	4000

#### 9) Cementing Data

Cementing from 8 ft. to 0 ft. # of sacks used 2  
 12 ft. to 8 ft. # of sacks used 1  
 Method Used Jet  
 Cementing By Jet  
 Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
 Method of verification of above distance \_\_\_\_\_

#### 13) Plugged

Well plugged within 48 hours  
 Casing left in well: \_\_\_\_\_  
 Cement/Bentonite placed in well: \_\_\_\_\_  

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

#### 10) Surface Completion

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

#### 14) Type Pump

Turbine  
 Jet  
 Submersible  
 Cylinder  
 Other  
 Depth to pump bowls, cylinder, jet, etc. \_\_\_\_\_ ft.

#### 11) Water Level

Static level \_\_\_\_\_ ft. below Date 11 04 01  
 Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_\_

#### 15) Water Test

Type test  Pump  Bailor  Jetted  Estimated  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

#### 12) Packers

Type \_\_\_\_\_ Depth \_\_\_\_\_

#### 16) Water Quality

Did you knowingly penetrate a strata which contain undesirable constituents.  
 YES  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
 Type of water: \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made  Yes  No

#### Company or individual's Name (type or print)

JONES ENV. DRILLING Lic. No. 4931M  
 Address 1911 N. Lexington Blvd City CC State TX Zip 78409  
 Signature Paul Daniloff 6, 11, 02 Date  
 Licensed Driller/Pump Installer Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Toll free (800)803-9202

Email address: water\_well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <u>Encycle</u>	Address <u>5500 UPRIVER Rd.</u>	City <u>Corpus Christi</u>	State <u>Tx.</u>	Zip
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**2) WELL LOCATION**

County <u>Nueces</u>	Physical Address <u>5500 UPRIVER Rd.</u>	City <u>Corpus Christi</u>	State <u>Tx</u>	Zip
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**3) Type of Work** MW 14

New Well     Reconditioning  
 Replacement     Deepening

Lat.	Long.	Grid # <u>83-12-2</u>
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**4) Proposed Use (check)**     Monitor     Environmental Soil Boring     Domestic    **5)** NT

Industrial     Irrigation     Injection     Public Supply     De-watering     Testwell

Rig Supply    If Public Supply well, were plans submitted?     Yes     No

**6) Drilling Date**

Started <u>11 26 07</u>	Diameter of Hole		
	Dia. (in.)	From (ft)	To (ft)
Completed <u>11 26 07</u>	<u>8</u>	<u>0</u>	<u>24</u>

**7) Drilling Method (check)**

Driven  
 Air Rotary     Mud Rotary     Bored  
 Air Hammer     Cable Tool     Jetted  
 Other HSA

From (ft)	To (ft)	Description and color of formation material
<u>0-2</u>	<u>14</u>	<u>Clay</u>
<u>2-8</u>	<u>14</u>	<u>" "</u>
<u>8-14</u>	<u>14</u>	<u>" "</u>
<u>14-20</u>	<u>24</u>	<u>orange tan silt</u>
<u>20-23.5</u>	<u>24</u>	<u>Tan to orange sand with</u>
<u>23.5-24</u>	<u>24</u>	<u>clay</u>

**3) Borehole Completion**     Open Hole     Straight Wall  
 Under-reamed     Gravel Packed     Other \_\_\_\_\_  
If Gravel Packed give the interval from 24 ft to 7 ft

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg. if commercial	Setting (ft)		Casing / Screen
			From	To	
<u>2</u>	<u>N</u>	<u>PVC SCREEN</u>	<u>24</u>	<u>9</u>	<u>210</u>
<u>2</u>	<u>N</u>	<u>PVC RISER</u>	<u>9</u>	<u>0</u>	<u>400</u>

**9) Cementing Data**

Cementing from 5 ft to 0 ft. # of sacks used 1  
Method Used BIS ft. to 5 ft. # of sacks used 1  
Cementing By JEFF  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

**13) Plugged**     Well plugged within 48 hours

Casing left in well: \_\_\_\_\_ Cement/Bentonite placed in well: \_\_\_\_\_

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Type Pump**

Turbine     Jet N/A     Submersible     Cylinder  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet etc. \_\_\_\_\_ ft.

**15) Water Test**

Typetest  Pump     Bailor     Jetted     Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**16) Water Quality**

Did you knowingly penetrate a strata which contain undesirable constituents.  
 YES     NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
Type of water: \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made     Yes     No

**11) Water Level**

Static level 20 ft. below Date 11 26 07  
Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_\_

**12) Packers**

N/A Type \_\_\_\_\_ Depth \_\_\_\_\_

Company or individual's Name (type or print) <u>JONES ERU. DRILLING</u>	Lic. No. <u>4931M</u>
Address <u>1911 N. Lexington</u>	City <u>C.C.</u> State <u>Tx</u> Zip <u>78409</u>
Signature <u>Paul Smith</u> Date <u>11 26 07</u>	Signature _____ Date _____
Licensed Driller/Pump Installer	Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Toll free (800)803-9202

Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <u>Encycle</u>	Address <u>5500 UPRIVER RD</u>	City <u>Corpus Christi</u>	State <u>TX</u>	Zip <u>78409</u>
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**2) WELL LOCATION**

County <u>Nueces</u>	Physical Address <u>5500 UPRIVER RD</u>	City <u>Corpus Christi</u>	State <u>TX</u>	Zip <u></u>
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3) Type of Work <small>MW # 10</small> <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Reconditioning <input type="checkbox"/> Replacement <input type="checkbox"/> Deepening	4) Proposed Use (check) <input checked="" type="checkbox"/> Monitor <input type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply <input type="checkbox"/> If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <u>NT</u>
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6) Drilling Date Started <u>11 19 01</u> Completed <u>11 19 01</u>	Diameter of Hole Diameter From (ft) To (ft) <u>8 0 34</u>	7) Drilling Method (check) <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Other <input checked="" type="checkbox"/> Other <u>HS A</u>
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From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion																		
0-0.5		fill	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other: <u>20/40</u> If Gravel Packed give the interval from <u>34</u> ft. to <u>12</u> ft.																		
0.5-2		silty clay	Casing, Blank Pipe, and Well Screen Data <table border="1"> <thead> <tr> <th>Dia. (in.)</th> <th>New Or Used</th> <th>Steel, Plastic, etc. Peril., Slotted, etc. Screen Mfg., if commercial</th> <th>Setting (ft): From</th> <th>To</th> <th>Cage Casing Screen</th> </tr> </thead> <tbody> <tr> <td>2</td> <td>N</td> <td>PVC SCREEN</td> <td>34</td> <td>14</td> <td>010</td> </tr> <tr> <td>2</td> <td>N</td> <td>PVC RIG</td> <td>14</td> <td>0</td> <td>40 gage</td> </tr> </tbody> </table>	Dia. (in.)	New Or Used	Steel, Plastic, etc. Peril., Slotted, etc. Screen Mfg., if commercial	Setting (ft): From	To	Cage Casing Screen	2	N	PVC SCREEN	34	14	010	2	N	PVC RIG	14	0	40 gage
Dia. (in.)	New Or Used	Steel, Plastic, etc. Peril., Slotted, etc. Screen Mfg., if commercial		Setting (ft): From	To	Cage Casing Screen															
2	N	PVC SCREEN		34	14	010															
2	N	PVC RIG		14	0	40 gage															
2-14		clayey silt																			
14-17		silt																			
17-18		silty sand with																			
18-27		sand with																			
27-32.5		" "																			
32.5-34		clay																			

9) Cementing Data  
Cementing from 10 ft. to 0 ft. # of sacks used 2  
Method Used hand  
Cementing By TECO  
Distance to septic system field or other concentrated contamination      ft.  
Method of verification of above distance     

13) Plugged  Well plugged within 48 hours  
Casing left in well:  Cement/Bentonite placed in well:  
From (ft) To (ft) From (ft) To (ft) Sacks used  
N/A

14) Type Pump  
 Turbine  Jet N/A  Submersible  Cylinder  
 Other       
Depth to pump bowls, cylinder, jet etc.      ft.

15) Water Test  
Type test  Pump  Bailor  Jetted  Estimated  
Yield:      gpm with      ft. drawdown after      hrs.

16) Water Quality  
Did you knowingly penetrate a strata which contain undesirable constituents.  
 YES  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
Type of water:      Depth of Strata       
Was a chemical analysis made  Yes  No

10) Surface Completion  
 Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

11) Water Level  
Static level 121 ft. below Date 11 19 01  
Artesian Flow      gpm. Date     

12) Packers N/A Type      Depth     

Company or individual's Name (type or print) <u>JONES ENCL. DRILLING</u>	Lic. No. <u>4931A</u>
Address <u>1911 N. Livingston</u>	City <u>CC</u> State <u>TX</u> Zip <u>78409</u>
Signature <u>Paul Davis</u>	Signature <u>    </u>
Licensed Driller/Pump Installer	Apprentice
Date <u>6 11 02</u>	Date <u>    </u>

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

TEXAS DEPARTMENT OF LICENSING AND REGULATION  
Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512) 463-7880 FAX (512) 463-8816  
Toll free (800) 803-9212  
Email address: [water.well@license.state.tx.us](mailto:water.well@license.state.tx.us)

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

WELL REPORT

A. WELL IDENTIFICATION AND LOCATION DATA

1) OWNER

Name <u>Encycle</u>	Address <u>5500 UPRIVER Rd. Corpus Christi TX.</u>	City <u>Corpus Christi TX.</u>	State <u>TX.</u>	Zip <u></u>
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2) WELL LOCATION

County <u>Nueces</u>	Physical Address <u>5500 UPRIVER Rd. Corpus Christi TX.</u>	City <u>Corpus Christi TX.</u>	State <u>TX.</u>	Zip <u></u>
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3) Type of Work M-16

<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Reconditioning <input type="checkbox"/> Replacement <input type="checkbox"/> Deepening	<input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Rig Supply	<input type="checkbox"/> Monitor <input type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Public Supply <input type="checkbox"/> If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Domestic <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Yes <input type="checkbox"/> No	Grid # <u>83-12-2</u> 5) <u>NI</u>
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a) Drilling Date Started <u>11 21 01</u> Completed <u>11 21 01</u>	Diameter of Hole From <u>8</u> to <u>24</u>	Drilling Method (check) <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Air Hammer <input checked="" type="checkbox"/> Jet HSA
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From (ft) <u>0-8</u> To (ft) <u>8-22.5</u> Description and color of formation material <u>S. lty Clay</u> <u>" "</u>	b) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Well <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>20/40</u>
--	---

From (ft) <u>22.5-23</u> To (ft) <u>23-24</u> Description and color of formation material <u>sand brown wt</u> <u>Clay</u>	Casing, Blank Pipe, and Well Screen Data <table border="1"> <tr> <th>Dia.</th> <th>Material</th> <th>Setting (ft)</th> <th>Casing</th> </tr> <tr> <td><u>2</u></td> <td><u>N PVC Screen</u></td> <td><u>9-24</u></td> <td><u>.010</u></td> </tr> <tr> <td><u>2</u></td> <td><u>N PVC R. SUR</u></td> <td><u>0-9</u></td> <td><u>Sch 40</u></td> </tr> </table>	Dia.	Material	Setting (ft)	Casing	<u>2</u>	<u>N PVC Screen</u>	<u>9-24</u>	<u>.010</u>	<u>2</u>	<u>N PVC R. SUR</u>	<u>0-9</u>	<u>Sch 40</u>
Dia.	Material	Setting (ft)	Casing										
<u>2</u>	<u>N PVC Screen</u>	<u>9-24</u>	<u>.010</u>										
<u>2</u>	<u>N PVC R. SUR</u>	<u>0-9</u>	<u>Sch 40</u>										

(Use reverse side of Well Owner's copy, if necessary)	9) Cementing Data Cementing from <u>5</u> ft to <u>9</u> ft # of sacks used <u>1</u> Method Used <u>Hand</u> Cementing By <u>JEDF</u> Distance to septic system field or other concentrated contamination <u>0</u> ft. Method of verification of above distance <u></u>
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13) Plugged <input type="checkbox"/> Well plugged within 48 hours <input checked="" type="checkbox"/> Cement/Bentonite placed in well: <u>N/A</u>	10) Surface Completion <input checked="" type="checkbox"/> Specified Surface Sizing Installed <input type="checkbox"/> Specified Surface Sleeve Installed <input type="checkbox"/> Pitless Adapter Used <input type="checkbox"/> Approved Alternative Procedure Used
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14) Type Pump <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <input type="checkbox"/> Other <u></u> Depth to pump bowls, cylinder, jet etc. <u></u>	11) Water Level Static level <u>22.5</u> ft. below Date <u>11 21 01</u> Artesian Flow <u></u> gpm. Date <u></u>
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15) Water Test Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated Yield: <u></u> gpm with <u></u> ft. drawdown after <u></u> hrs.	12) Packers <u>N/A</u> Type <u></u> Depth <u></u>
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16) Water Quality Did you knowingly penetrate a strata which contain undesirable constituents? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER Type of water: <u></u> Depth of Strata <u></u> Was a chemical analysis made <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---

Company or individual's Name (type or print) <u>JONES ENV. DRILLING</u>	Lic. No. <u>4931M</u>
Address <u>1911 N. Lexington</u> City <u>CC.</u> State <u>TX.</u> Zip <u>78409</u>	
Signature <u>Paul Derlotts</u> Date <u>6 11 02</u>	Signature <u></u> Date <u></u>
Licensed Driller/Pump Installer	Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

**Water Well Driller/Pump Installer Program**

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Toll free (800)803-9202

Email address: [water.well@license.state.tx.us](mailto:water.well@license.state.tx.us)

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name: ENCYCLE Address: 5500 UPRIVER RD. City: Corpus Christi State: TX Zip: \_\_\_\_\_

**2) WELL LOCATION**

County: Nueces Physical Address: 5500 UPRIVER RD. City: Corpus Christi State: TX Zip: \_\_\_\_\_

**3) Type of Work** MW 17

New Well  Reconditioning  Replacment  Deepening

4) Proposed Use (check)  Monitor  Environmental Soil Spring  Domestic  Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  Rig Supply

If Public Supply well, were plans submitted?  Yes  No

5) Drilling Date: 11-19-01 Diameter of Hole: 8 5 37 Drilling Method (check)  Down the Hole  Air Riser  Mud Riser  Borehole

From ft.	To ft.	Description and color of formation material	Borehole Completion	Casing, Blank Pipe, and Well Screen Data
0-2		Clay	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Well <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>20/40</u>	
2-4		Silty Clay		
4-6		" "		
6-26		" "		
26-37		wet sand		2 N PVC SCREEN 37 17 CID
37-38		Clay		2 N PVC Riser 17 0 CID

6) Cementing Data  
Cementing from 17 ft. to 6 ft. for sacks used 3  
Cementing from 15 ft. to 13 ft. for sacks used 1  
Method Used TEDE  
Cementing By TEDE  
Distance to septic system field or other concentrated contamination \_\_\_\_\_ ft.  
Method of verification of above distance \_\_\_\_\_

7) Plugged  Well plugged within 48 hours  Well plugged with Cement/Bentonite placed in well: NA

8) Type Pump  
 Turbine  Jet  Submersible  Cylinder  
Depth in pump bowl, cylinder, jet etc. \_\_\_\_\_ ft.

9) Water Test  
Type test  Pump  Bailor  Jetted  Estimated  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

10) Water Quality  
Did you knowingly penetrate a strata which contain undesirable constituents?  
 YES  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
Was a chemical analysis made  Yes  No

11) Water Level  
Static level 20 ft. below Date 11 19 01  
Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_\_

12) Packers Type Depth

Company or individual's Name (type or print): JONES ENV. DRILLING Lic. No. 4931M  
Address: 1911 N. Lexington Blvd. City: C.C. State: TX Zip: 78409  
Signature: Paul Driloff Date: 6, 11, 02  
Licensed Driller/Pump Installer Date \_\_\_\_\_ Apprentice Date \_\_\_\_\_

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Toll free (800)803-9202

Email address: [water\\_well@license.state.tx.us](mailto:water_well@license.state.tx.us)

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <i>EMCYOLE</i>	Address <i>5500 UPRIVER Rd.</i>	City <i>Corpus Christi</i>	State <i>TX</i>	Zip <i>78409</i>
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**2) WELL LOCATION**

County <i>Nueces</i>	Physical Address <i>5500 UPRIVER Rd.</i>	City <i>Corpus Christi</i>	State <i>TX</i>	Zip <i>78</i>
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3) Type of Work <i>MW 18</i>	Lat.	Long.	Grid # <i>83-12-2</i>
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<input type="checkbox"/> New Well <input type="checkbox"/> Reconditioning <input type="checkbox"/> Replacement <input type="checkbox"/> Deepening	4) Proposed Use (check) <input checked="" type="checkbox"/> Monitor <input type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply    If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <i>NT</i>
--	--	--------------

6) Drilling Date	Diameter of Hole	7) Drilling Method (check)
Started <i>11 13 01</i>	Dia. (in.)    From (ft)    To (ft) <i>8    0    29</i>	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Other <i>HSA</i>
Completed <i>11 13 01</i>		

From (ft)    To (ft)    Description and color of formation material	8) Borehole Completion <input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <i>20/40</i> If Gravel Packed give the interval from <i>29</i> ft. to <i>12</i> ft.
<i>0-4 Sand &amp; fill</i>	
<i>4-12 Clays silt</i>	
<i>12-22.5 Sand mat @ 18'</i>	
<i>22.5-29 Clay</i>	

Casing, Blank Pipe, and Well Screen Data

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gauge Casing Screen
			From	To	
<i>2</i>	<i>N</i>	<i>PVC screen</i>	<i>29-14</i>	<i>0</i>	<i>0</i>
<i>2</i>	<i>N</i>	<i>PVC Riser</i>	<i>14-0</i>	<i>0</i>	<i>4090</i>

13) Plugged     Well plugged within 48 hours  
Casing left in well:    Cement/Bentonite placed in well: *NA*

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

9) Cementing Data  
Cementing from *10* ft. to *0* ft. # of sacks used *2*  
Method Used *DIS*    *17* ft. to *10* ft. # of sacks used *1*  
Cementing By *JENI*  
Distance to septic system field or other concentrated contamination *ft.*  
Method of verification of above distance

14) Type Pump  
 Turbine     Jet     Submersible     Cylinder *NA*  
 Other \_\_\_\_\_  
Depth to pump bowls, cylinder, jet etc. \_\_\_\_\_ ft.

10) Surface Completion  
 Specified Surface Slab installed  
 Specified Surface Sleeve installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

15) Water Test  
Type test  Pump     Bailor     Jetted     Estimated    *NA*  
Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

11) Water Level  
Static level *12* ft. below    Date *11 12 01*  
Artesian Flow \_\_\_\_\_ gpm.    Date \_\_\_\_\_

16) Water Quality  
Did you knowingly penetrate a strata which contain undesirable constituents.  
 YES     NO    If yes, did you submit a REPORT OF UNDESIRABLE WATER  
Type of water \_\_\_\_\_    Depth of Strata \_\_\_\_\_  
Was a chemical analysis made     Yes     No

12) Packers

Type	Depth

Company or individual's Name (type or print) <i>JONES ENV. DRILLING</i>	Lic. No. <i>4931M</i>
Address <i>1911 N. Lexington</i>	City <i>CC.</i>
State <i>TX.</i>	Zip <i>78409</i>
Signature <i>Paul Denitoff</i>	Date <i>6 11 02</i>
Licensed Driller/Pump Installer	Apprentice

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616  
Toll free (800)803-9202

Email address: [water.well@license.state.tx.us](mailto:water.well@license.state.tx.us)

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <u>Encyclo</u>	Address <u>5500 UPRIVER Rd. Corpus Christi TX</u>	City <u>Corpus Christi TX</u>	State <u>TX</u>	Zip <u>78</u>
------------------------	--	----------------------------------	--------------------	------------------

**2) WELL LOCATION**

County <u>Nueces</u>	Physical Address <u>5500 UPRIVER Rd. Corpus Christi TX</u>	City <u>Corpus Christi TX</u>	State <u>TX</u>	Zip <u>78</u>
-------------------------	---	----------------------------------	--------------------	------------------

**3) Type of Work** MW 19

<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Reconditioning <input type="checkbox"/> Replacement <input type="checkbox"/> Deepening	<b>4) Proposed Use (check)</b> <input checked="" type="checkbox"/> Monitor <input type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply	Lat. _____ Long. _____ Grid # <u>83-12-2</u> 5) <u>NT</u> If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--	---

**6) Drilling Date**

Started <u>11-12-01</u>	Diameter of Hole		
	Dia. (in)	From (ft)	To (ft)
		<u>9</u>	<u>27</u>
Completed <u>11-12-01</u>			

**7) Drilling Method (check)**

<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored <input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Other <u>HSA</u>	<input checked="" type="checkbox"/> Driven <input type="checkbox"/> Straight Wall <input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <u>20/40</u> If Gravel Packed give the interval from <u>27</u> ft. to <u>10</u> ft.
---	---

**8) Borehole Completion**

From (ft)	To (ft)	Description and color of formation material
		<u>0-4 silt clay</u>
		<u>4-7 " "</u>
		<u>7-10 " "</u>
		<u>10-14 silt sand</u>
		<u>14-26.5 sand wet @ 16</u>
		<u>26.5-27 clay</u>

**Casing, Blank Pipe, and Well Screen Data**

Dia. (in)	New Or Used	Steel, Plastic, etc. Perf. Slotted, etc. Screen Mfg. if commercial	Setting (ft)		Casing or Screen
			From	To	
		<u>2" N PVC screen</u>	<u>27</u>	<u>12</u>	<u>20/40</u>
		<u>2" N PVC R.P.P.</u>	<u>12</u>	<u>0</u>	<u>drilled</u>

**9) Cementing Data**

Cementing from 8 ft. to 0 ft. # of sacks used 2  
 # of sacks used 1  
 Method Used W  
 Cementing By JED  
 Distance to septic system field or other concentrated contamination ft.  
 Method of verification of above distance \_\_\_\_\_

(Use reverse side of Well Owner's copy, if necessary)

**13) Plugged**

Well plugged within 48 hours  
 Cement/Bentonite placed in well: N/A

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

**10) Surface Completion**

Specified Surface Slab Installed  
 Specified Surface Sleeve Installed  
 Pitless Adapter Used  
 Approved Alternative Procedure Used

**14) Type Pump**

Turbine  
 Jet  
 Submersible  
 Cylinder N/A  
 Other \_\_\_\_\_  
 Depth to pump bowls, cylinder, jet etc. \_\_\_\_\_ ft.

**11) Water Level**

Static level 10 ft. below Date 11-12-01  
 Artesian Flow \_\_\_\_\_ gpm. Date \_\_\_\_\_

**15) Water Test**

Type test  Pump  Bailor  Jetted  Estimated N/A  
 Yield: \_\_\_\_\_ gpm with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

**12) Packers**

Type	Depth

**16) Water Quality**

Did you knowingly penetrate a strata which contain undesirable constituents?  
 YES  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
 Type of water \_\_\_\_\_ Depth of Strata \_\_\_\_\_  
 Was a chemical analysis made  Yes  No

Company or individual's Name (type or print) <u>JONES ENR. DRILLING</u>	Lic. No. <u>4931M</u>
Address <u>1811 N. Lexington</u>	City <u>Corpus Christi TX</u>
State <u>TX</u>	Zip <u>78409</u>
Signature <u>Paul Penit</u>	Date <u>6-11-02</u>
Licensed Driller/Pump Installer	Apprentice
Date	Date

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Toll free (800)803-9202

Email address: water.well@license.state.tx.us

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <i>Encycle</i>	Address <i>5500 UPRIVER Rd.</i>	City <i>Corpus</i>	State <i>TX</i>	Zip <i>78</i>
------------------------	------------------------------------	-----------------------	--------------------	------------------

**2) WELL LOCATION**

County <i>Nueces</i>	Physical Address <i>5500 UPRIVER Rd.</i>	City <i>Corpus Christi</i>	State <i>TX</i>	Zip <i>78</i>
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3) Type of Work <i>MW 20</i>	Lat.	Long.	Grid # <i>83-12-2</i>
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<input type="checkbox"/> New Well <input type="checkbox"/> Reconditioning <input type="checkbox"/> Replacement <input type="checkbox"/> Deepening	4) Proposed Use (check) <input type="checkbox"/> Monitor <input type="checkbox"/> Environmental Soil Boring <input type="checkbox"/> Domestic <input type="checkbox"/> Industrial <input type="checkbox"/> Irrigation <input type="checkbox"/> Injection <input type="checkbox"/> Public Supply <input type="checkbox"/> De-watering <input type="checkbox"/> Testwell <input type="checkbox"/> Rig Supply    If Public Supply well, were plans submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No	5) <i>NT</i>
--	---	--------------

6) Drilling Date	Diameter of Hole			7) Drilling Method (check)
Started <i>11 20 01</i>	Dia. (in)	From (ft)	To (ft)	<input type="checkbox"/> Driven
Completed <i>11 20 01</i>	<i>8</i>	<i>0</i>	<i>35</i>	<input type="checkbox"/> Air Rotary <input type="checkbox"/> Mud Rotary <input type="checkbox"/> Bored
				<input type="checkbox"/> Air Hammer <input type="checkbox"/> Cable Tool <input type="checkbox"/> Jetted
				<input checked="" type="checkbox"/> Other <i>HSA</i>

From (ft)	To (ft)	Description and color of formation material	8) Borehole Completion
<i>0-4</i>	<i>5 1/2</i>	<i>silty sand</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Straight Wall
<i>4-6</i>	<i>5 1/2</i>	<i>clay</i>	<input type="checkbox"/> Under-reamed <input type="checkbox"/> Gravel Packed <input checked="" type="checkbox"/> Other <i>20/40</i>
			If Gravel Packed give the interval from <i>35</i> ft to <i>13</i> ft

Casing, Blank Pipe, and Well Screen Data					
Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Casing Screen
			From	To	
<i>2</i>	<i>0</i>	<i>PVC screen</i>	<i>35</i>	<i>15</i>	<i>010</i>
<i>2</i>	<i>0</i>	<i>PVC Riser</i>	<i>15</i>	<i>0</i>	<i>42300</i>

9) Cementing Data
Cementing from <i>11</i> ft to <i>0</i> ft. # of sacks used <i>2</i>
Method Used <i>BP hand</i>
Cementing By <i>JED</i>
Distance to septic system field or other concentrated contamination <i>0</i> ft.
Method of verification of above distance

13) Plugged	<input type="checkbox"/> Well plugged within 48 hours			
Casing left in well:	Cement/Bentonite placed in well: <i>N/A</i>			
From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

14) Type Pump
<input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Submersible <input type="checkbox"/> Cylinder <i>N/A</i>
Depth to pump bowls, cylinder, jet etc. _____ ft.

15) Water Test
Type test <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input type="checkbox"/> Jetted <input type="checkbox"/> Estimated <i>N/A</i>
Yield: _____ gpm with _____ ft. drawdown after _____ hrs.

16) Water Quality
Did you knowingly penetrate a strata which contain undesirable constituents.
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, did you submit a REPORT OF UNDESIRABLE WATER
Type of water _____ Depth of Strata _____
Was a chemical analysis made <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

10) Surface Completion
<input checked="" type="checkbox"/> Specified Surface Slab Installed
<input type="checkbox"/> Specified Surface Sleeve Installed
<input type="checkbox"/> Pitless Adapter Used
<input type="checkbox"/> Approved Alternative Procedure Used

11) Water Level
Static level <i>17</i> ft. below Date <i>11 12 01</i>
Artesian Flow _____ gpm. Date _____

12) Packers	Type	Depth

Company or individual's Name (type or print)	<i>JONES ENV. Drilling</i>	Lic. No.	<i>4931M</i>
Address	<i>194 N. Lexington</i>	City	<i>Corpus Christi</i>
		State	<i>TX</i>
		Zip	<i>78409</i>
Signature	<i>John Smith</i>	Date	<i>6 11 02</i>
Licensed Driller/Pump Installer		Apprentice	

Attention Owner:  
Confidentiality Privilege Notice  
on reverse side of owner's copy.

**Texas Department of License and Regulation**

Water Well Driller/Pump Installer Program

P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616

Toll free (800)803-9922

Email address: [water.well@license.state.tx.us](mailto:water.well@license.state.tx.us)

This form must be completed  
and filed with the department  
and owner within 60 days  
upon completion of the well.

**WELL REPORT**

**A. WELL IDENTIFICATION AND LOCATION DATA**

**1) OWNER**

Name <u>ENCYCLE</u>	Address <u>5500 UPRIVER RD C.C.</u>	City <u>TX</u>	State <u>TX</u>	Zip
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**2) WELL LOCATION**

County <u>Nueces</u>	Physical Address <u>5500 UPRIVER RD C.C.</u>	City <u>TX</u>	State <u>TX</u>	Zip
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3) Type of Work MW 21 Lat. Long. Grid # 83-12-2

4) Proposed Use (check)  Monitor  Environmental Soil Boring  Domestic  Industrial  Irrigation  Injection  Public Supply  De-watering  Testwell  Rig Supply  Replacement  Deepening  If Public Supply well, were plans submitted?  Yes  No

6) Drilling Date Started 11 12 01 Completed 11 12 01

Diameter of Hole		
Dia. (in.)	From (ft)	To (ft)
	<u>8</u>	<u>27.5</u>

7) Drilling Method (check)  Driven  Air Rotary  Mud Rotary  Bored  Air Hammer  Cable Tool  Jetted  Other HSA

From (ft)	To (ft)	Description and color of formation material
<u>0-2</u>		<u>Silty Clay</u>
<u>2-4</u>		
<u>4-12</u>		
<u>12-14</u>		
<u>14-27</u>		<u>Sand with @ 17</u>
<u>27-27.5</u>		<u>Clay</u>

8) Borehole Completion  Open Hole  Straight Wall  Under-reamed  Gravel Packed  Other 20/40  
If Gravel Packed give the interval from 27 ft. to 10 ft.

Casing, Blank Pipe, and Well Screen Data

Dia. (in.)	New Or Used	Steel, Plastic, etc. Perf., Slotted, etc. Screen Mfg., if commercial	Setting (ft)		Gage Casing Screen
			From	To	
<u>2</u>	<u>N</u>	<u>PVC screen</u>	<u>27</u>	<u>12</u>	<u>010</u>
<u>2</u>	<u>N</u>	<u>PVC riser</u>	<u>12</u>	<u>0</u>	<u>400</u>

13) Plugged  Well plugged within 48 hours  
Casing left in well: N/A Cement/Bentonite placed in well: N/A

From (ft)	To (ft)	From (ft)	To (ft)	Sacks used

9) Cementing Data  
Cementing from 2 ft. to 0 ft. # of sacks used 2  
Method Used HS  
Cementing By TEW  
Distance to septic system field or other concentrated contamination ft.  
Method of verification of above distance ft.

14) Type Pump  Turbine  Jet  Submersible  Cylinder  Other N/A  
Depth to pump bowls, cylinder, jet etc. ft.

10) Surface Completion  Specified Surface Slab Installed  Specified Surface Sleeve Installed  Pitless Adapter Used  Approved Alternative Procedure Used

15) Water Test  
Type test  Pump  Bailer  Jetted  Estimated N/A  
Yield: gpm with ft. drawdown after hrs.

11) Water Level  
Static level ft. below Date 11 12 01  
Artesian Flow gpm. Date 1 1

16) Water Quality  
Did you knowingly penetrate a strata which contain undesirable constituents.  
 YES  NO If yes, did you submit a REPORT OF UNDESIRABLE WATER  
Type of water ft. Depth of Strata ft.  
Was a chemical analysis made  Yes  No

12) Packers

Type	Depth
<u>N/A</u>	

Company or individual's Name (type or print) <u>JONES ENV. DRILLING</u>	Lic. No. <u>4931M</u>
Address <u>1911 N. Lexington</u>	City <u>Corpus Christi</u>
State <u>TX</u>	Zip <u>78409</u>
Signature <u>Paul Deribets</u>	Date <u>6.11.02</u>
Licensed Driller/Pump Installer	Apprentice
Date	Date

**APPENDIX D**

ARCADIS

**Appendix D**

Manifests for Monitor Well Drill  
Cuttings and Boneyard Materials



*Weth 0697*

Please print or type. (Form designed for use on white (12-pitch) typewriter.)

Form approved. CMB No. 2660-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. <i>TXD00511718</i>	Manifest Documentation	2. Page 1 of 1	information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <i>ENCYCLE / TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469</i>				A. State Manifest Document Number <i>02542141</i>			
4. Generator's Phone <i>(361) 289-0300</i>				B. State Generator's ID <i>30003</i>			
5. Transporter 1 Company Name <i>ABSOLUTE INDUSTRIES</i>		6. US EPA ID Number <i>TXR000029728</i>		C. State Transporter's ID <i>85869</i>			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone <i>361-387-7747</i>			
				E. State Transporter's ID <i>301-387-7747</i>			
				F. Transporter's Phone			
9. Designated Facility Name and Site Address <i>TEXAS ECOLOGISTS 3.5 MILES SOUTH ON PETROUILA ROBSTOWN, TEXAS</i>				10. US EPA ID Number <i>TXD069452340</i>		G. State Facility's ID <i>50052</i>	
				H. Facility's Phone <i>361-387-3518</i>			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	15. Waste No.
X	a. <i>RD, HAZARDOUS WASTE SOLID, NOS, CLASS 1 NA3077, PGII (D006)</i>		<i>001</i>	<i>DT</i>	<i>11520</i>	<i>P</i>	<i>0015319H</i>
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above <i>CONTAMINATED SOIL 09-004-5847</i>				K. Handling Codes for Wastes Listed Above <i>M11/M132</i>			
15. Special Handling Instructions and Additional Information <i>EMERGENCY CONTACT - 361-289-0300</i> <span style="float: right;"><i>ERG #171</i></span>							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/picarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name <i>BETH PAYNE</i>				Signature <i>B Payne</i>		Month Day Year <i>03/14/02</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name <i>Ernest Chavez</i>				Signature <i>Ernest Chavez</i>		Date <i>03/14/02</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name				Signature		Date	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name <i>Ernest Chavez</i>				Signature <i>Ernest Chavez</i>		Date <i>03/15/02</i>	



NOV 21 77

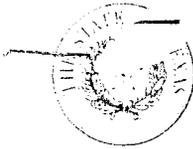
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXP 008117186190072	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340012				
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003				
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TX R 000029728		C. State Transporter's ID 85869		D. Transporter's Phone 361-387-7747		
7. Transporter 2 Company Name		3. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone		
9. Designated Facility Name and Site Address TEXAS ECOLOGIST 3.5 MILES SOUTH ON PETRONILLA RD ROBSTOWN, TEXAS 78386				10. US EPA ID Number TX D 069452340		G. State Facility's ID 50052		
				H. Facility's Phone 361-387-3518				
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	I. Waste No.
X	a. RA, HAZARDOUS WASTE SOLID, NOS, CLASS 9, NA 3077, 7G III (D006, D008, F006, SEE ATT)			003	DM	1170	P	0021302H
	b.							
	c.							
	d.							
J. Additional Descriptions for Materials Listed Above a. CONTAMINATED SOIL - 09 004 3654				K. Handling Codes for Wastes Listed Above A. M-125				
15. Special Handling Instructions and Additional Information boring samples								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation, and select the best waste management method that is available to me and that I can afford.								
Printed/Typed Name BETH PAYNE				Signature Beth Payne		Month Day Year 11 01 2001		
17. Transporter 1 Acknowledgement of Receipt of Materials								
Printed/Typed Name SIMON VALABOZ				Signature Simon Valaboz		Month Day Year 10 10 01		
18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed/Typed Name				Signature		Month Day Year		
19. Discrepancy Indication Space								
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Printed/Typed Name				Signature		Date 12 12 01		

TEXAS NATURAL RESOURCE  
CONSERVATION COMMISSION

P.O. Box 13087  
Austin, Texas 78711-3087



W007 02432

Please print or type. (Form designed for use on dial, 12-pitch typewriter.)

Form approved: OMS No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD008117186172447	Manifest Document No. 1172447	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORTLUS CHRISTI, TX 78469				A. State Manifest Document Number 02140447		B. State Generator's ID 30003	
4. Generator's Phone (361) 259-0300		6. US EPA ID Number TXD001039725		C. State Transporter's ID 85569		D. Transporter's Phone 361-387-7747	
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		7. Transporter 2 Company Name		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address TEXAS ECOLOGIST 3.5 MILES SOUTH ON PETROWILLA RD BUSTONIA, TEXAS 78351				10. US EPA ID Number TXD 469453340		G. State Facility's ID 50052	
11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group) Y 1. RG, HAZARDOUS WASTE SOLID, A.C.S. (CONTAINS LEAD AND CADMIUM) CLASS 9, UN3077, PG III (D.D.C., T.C.S.T)				12. Containers No. Type 001 DT	13. Total Quantity 42440	14. Unit Wt./Vol P	15. Waste No. 0015319H
J. Additional Descriptions for Materials Listed Above WEST BONE YARD UDI 09-004-5847				K. Handling Codes for Wastes Listed Above M-111, M-132 Receipt = 42,540 P 11/12/01			
15. Special Handling Instructions and Additional Information ERG #171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH TAYLOR		Signature <i>Beth Taylor</i>		Month Day Year 11/11/2001			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Jaime GARZA		Signature <i>Jaime Garza</i>		Month Day Year 11/12/01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name <i>Sam</i>		Signature <i>SM</i>		Month Day Year 11/12/01			

CONTAINER NO.

TRANSPORTER

FACILITY

TEXAS NATURAL RESOURCE  
CONSERVATION COMMISSION

P.O. Box 13087

Austin, Texas 73711-3087



*Woff*

Please print or type. (Form designed for use on white (12-pitch) typewriter.)

Form approved, OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117186170448</b>	Manifest Document No. <b>448</b>	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>				A. State Manifest Document Number <b>02140448</b>			
4. Generator's Phone ( <b>361</b> ) <b>289-0300</b>				B. State Generator's ID <b>30003</b>			
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>ITX B0000 29728</b>		C. State Transporter's ID <b>85869</b>			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone <b>361-387-9747</b>			
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC 3.5 MILES S. PETROUILA ROAD ROBSTOWN, TEXAS 78380</b>		10. US EPA ID Number <b>ITXD069452340</b>		E. State Transporter's ID			
				F. Transporter's Phone			
				G. State Facility's ID <b>50052</b>			
				H. Facility's Phone <b>361-387-3518</b>			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	15. Waste No.
a.	<b>HAZARDOUS WASTE SOLID, NOS, CLASS 9 NA 3077, PG III (D006, D008)</b>		<b>001</b>	<b>DT</b>	<b>42580</b>	<b>P</b>	<b>0051319H</b>
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above <b>METAL CONTAMINATED SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>				K. Handling Codes for Wastes Listed Above <b>M111 - M132</b>			
15. Special Handling Instructions and Additional Information <b>EMERGENCY CONTACT NUMBER - 361-289-0300</b> <b>ERG# 171</b>							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name <b>BETH PAYNE</b>				Signature <i>Beth Payne</i>		Month Day Year <b>11/15/01</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date			
Printed/Typed Name <i>Ernest Ybarra</i>				Signature <i>Ernest Ybarra</i>		Month Day Year <b>11/15/01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date			
Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Space <b>TECO wt = 42,540 lbs</b>							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date	
Printed/Typed Name <i>Ernest Garza</i>				Signature <i>Ernest Garza</i>		Month Day Year <b>11/19/01</b>	

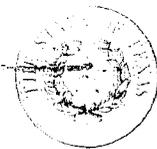
GENERATOR

TRANSPORTER

FACILITY



not 2107



Please print or type. (Form designed for use on elite (10-pitch) typewriter.)

Form approved: DMB No. 2050-0331

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD00811718673588	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address EACOLE TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340000			
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 361-387-7747			
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S. PETRONILA ROAD ROBSTOWN TEXAS 78380		10. US EPA ID Number TXD069452340		E. State Facility's ID 50052			
				F. Facility's Phone 361-387-3518			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	15. Waste No.
X	a. HAZARDOUS WASTE SOLID, ACS, CLASS 9 NA 3077, PG III (D006, D008)		001	CM	30832	P	0015319H
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S # 09-004-5847				K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300      ERG # 171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/20/01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name MARIO RENDON		Signature Mario Rendon		Month Day Year 11/20/01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Sam Parks		Signature Sam Parks		Month Day Year 11/20/01			

TEXAS NATURAL RESOURCE  
CONSERVATION COMMISSION

P.O. Box 13087

Austin, Texas 78711-3087



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved: OMB No. 2050-3039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address		ENCYCLE/TEXAS, INC P.O. BOX 4767 CORPUS CHRISTI, TX 78469		A. State Manifest Document Number 02340001			
4. Generator's Phone		361-289-0300		B. State Generator's ID 30003			
5. Transporter 1 Company Name		ABSOLUTE INDUSTRIES		6. US EPA ID Number		C. State Transporter's ID	
7. Transporter 2 Company Name				3. US EPA ID Number		D. Transporter's Phone	
9. Designated Facility Name and Site Address		TEXAS ECOLOGISTS, INC 3.5 MILES SOUTH ON PETRONILA RD ROBSTOWN, TX 78380		10. US EPA ID Number		E. State Transporter's ID	
						F. Transporter's Phone	
						G. State Facility's ID	
						H. Facility's Phone	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
X	a. HAZARDOUS WASTE SOLID, ACS, 9, NA3077 PS III (D006, D008)	001	CM	26460	P	0015319H	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
CONT SOIL & CONCRETE 09-004-5847				M111 / M132			
15. Special Handling Instructions and Additional Information:							
EMERGENCY CONTACT - 361-289-0300				ERS #171			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name		Signature		Month Day Year			
BETH PAYNE		<i>Beth Payne</i>		11/20/01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
Roy Garcia		<i>Roy Garcia</i>		11/20/01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name		Signature		Date			
Sam Lack		<i>Sam Lack</i>		11/20/01			



Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form approved: OMB No. 2050-2029.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD0081171812002	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE, TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340002			
4. Generator's Phone (361) 289-0300		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869		B. State Generator's ID 30003	
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		3. US EPA ID Number		D. Transporter's Phone 361-387-7747		E. State Transporter's ID	
7. Transporter 2 Company Name		10. US EPA ID Number TXD069452340		F. Transporter's Phone		G. State Facility's ID 52052	
9. Designated Facility Name and Site Address TEXAS ECOLOGIST, INC 3.5 MILE S PETRONILAR RD ROBSTOWN, TX 78380		8. US EPA ID Number		H. Facility's Phone 361-387-3518			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.	
X	HAZARDOUS WASTE SOLID, NOS, 9, NA 3077 PG III (D006, D008)	001	CM	23060	P	0015319 H	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above CONT SOIL & CONCRETE 09-004-5847				K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information EMERGENCY# 361-289-0300      ERG #171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/20/01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name MARIO RENCAN		Signature Mario Rencan		Month Day Year 11/20/01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space  TECO wt = 22820							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Ernest Garza		Signature Ernest Garza		Date 11/20/01			

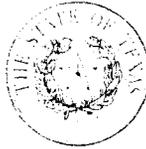


274657

Please print or type. (Form designed for use on elite (12-inch) typewriter.)

Form approved: OMB No. 2950-0020.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address		EUCYCLE, TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469		A. State Manifest Document Number			02340003
4. Generator's Phone (361) 289-0300		5. US EPA ID Number		C. State Transporter's ID			85869
6. Transporter 1 Company Name		ABSOLUTE INDUSTRIES		D. Transporter's Phone			361-387-7747
7. Transporter 2 Company Name		3. US EPA ID Number		E. State Transporter's ID			
8. Designated Facility Name and Site Address		TEXAS ECOLOGISTS, INC 3.5 MILES S PETRONILA RD BOOSTOWN, TX 78380		F. Transporter's Phone			
9. US EPA ID Number		10. US EPA ID Number		G. State Facility's ID			50052
11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No. Type		13. Total Quantity		14. Unit Wt./Vol.	15. Waste No.
a. HAZARDOUS WASTE SOLID, NOS, 9, NA3077 PG III (D006, D008)		001 CM		37140		P	00153A#
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
CONT SOIL & CONCRETE 09.004.5847				M111 / M132			
15. Special Handling Instructions and Additional Information							
EMERGENCY # 361-289-0300      ERG #171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name		Signature		Month Day Year			
BETH PAYNE		Beth Payne		11/12/01			
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date			
Printed/Typed Name		Signature		Month Day Year			
Tony Alvarez		Tony Alvarez		11/20/01			
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date			
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
Teco wt = 37,260 lb,							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name		Signature		Date			
Ernest Carr		Ernest Carr		11/20/01			



W0# 02499

Please print or type. (Form designed for use on auto-12 (dot-m) typewriter)

Form approved, OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address EUCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340004		B. State Generator's ID 30003	
4. Generator's Phone 361-289-0300		5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 361-387-7747		E. State Transporter's ID	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S. ON PETRONIL RD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD069452340		G. State Facility's ID 50052		H. Facility's Phone 361-387-3518	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	I. Waste No.	
a.	HAZARDOUS WASTE SOLID, NOS, 9, <del>603</del> 3077 PAII (D006, D008)	001	CM	34560	P	00153194	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above CONT SOIL & CONCRETE 09.004.5847				K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300      ERG # 171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE				Signature Beth Payne		Month Day Year 11/20/01	
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Mario Rendon				Signature Mario Rendon		Month Day Year 11/20/01	
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Space TECO wt = 34,540 lbs							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Ernest Garza				Signature Ernest Garza		Month Day Year 11/20/01	

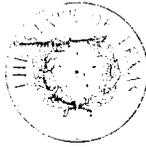


100 #2499

Form approved OMB No. 2050-0029

Please print or type. (Form designed for use on 8 1/2" (12-pitch) typewriter.)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD00811718642005	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <del>ERG ENCYCLE/TEXAS, INC</del> P.O. BOX 4767 CORPUS CHRISTI, TX 78467		A. State Manifest Document Number 02340005		B. State Generator's ID 30003			
4. Generator's Phone (361) 289-0300		5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number ITXR000029728		C. State Transporter's ID 85869	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 361-387-7747		E. State Transporter's ID	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S. PETROWILA RD ROBSTOWN, TX 78380		10. US EPA ID Number ITXD069452340		G. State Facility's ID 50052		H. Facility's Phone 361-387-3518	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
	a. HAZARDOUS WASTE SOLID, ACS. 9 NA3077 PG III (D006, D008)	001	CM	22440	P	0015319H	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above W/S# 09-004-5847 CONT SOIL & CONCRETE				K. Handling Codes for Wastes Listed Above M11 / M132			
15. Special Handling Instructions and Additional Information EMERSENCY# 361-289-0300 ERG #171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature <i>Beth Payne</i>		Month Day Year 11/20/01			
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Roy Gayer		Signature <i>Roy Gayer</i>		Date 1/2/02	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Date	
19. Discrepancy Indication Space TECO WT = 22400 lb							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date	
Printed/Typed Name Ernest Gayer		Signature <i>Ernest Gayer</i>		Month Day Year 11/20/01			



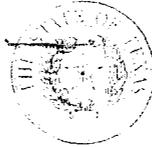
Please print or type. (Form designed for use on 8 1/2 pitch typewriter)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD0081171567220	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469			A. State Manifest Document Number 02340006		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300		5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869
7. Transporter 2 Company Name		3. US EPA ID Number		D. Transporter's Phone 361-387-7747		E. State Transporter's ID
8. Designated Facility Name and Site Address TEXAS ECOLOGIST, INC 3.5 MILES S. ON PETROUILA ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD069452340		G. State Facility's ID 38052		H. Facility's Phone 361-387-3518
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol
	a. HAZARDOUS WASTE SOLID, ACS, 9 DN 3077, PSIII (D006, D008)		001	DT	40800	P
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above CONT SOIL 09-004-5847			K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information 361-289-0300 - EMERGENCY# ERG 171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
17. Transporter 1 Acknowledgement of Receipt of Materials			Printed/Typed Name BETH PAYNE		Signature Beth Payne	
					Month Day Year 11/19/01	
18. Transporter 2 Acknowledgement of Receipt of Materials			Printed/Typed Name KIM UNAUERO		Signature Kim Unauero	
					Month Day Year 11/19/01	
19. Discrepancy Indication Space			Teco wt = 40,480 lb			
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.			Printed/Typed Name Ernest Carrera		Signature Ernest Carrera	
					Month Day Year 11/19/01	



Form designed for use on 8 1/2" (21-cm) typewriter

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TX D008117186	Manifest Document No. 70007	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469			A. State Manifest Document Number 02340007			
4. Generator's Phone (361) 289-0300			B. State Generator's ID 30003			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TX B000029728		C. State Transporter's ID 85869		
7. Transporter 2 Company Name		3. US EPA ID Number		D. Transporter's Phone 361-387-7747		
9. Designated Facility Name and Site Address TEXAS ECOLOGIST, INC 3.5 M. SOUTH ON PETROUILARD ROBSTOWN, TEXAS 78380		10. US EPA ID Number		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID 50052		
				H. Facility's Phone 361-387-3518		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol
	1. HAZARDOUS WASTE SOLID, NOS, 4 NA 3097, PG III (D006, D008)		001	DT	38160	P
	2.					
	3.					
	4.					
J. Additional Descriptions for Materials Listed Above CONT. SOIL TECO W/SH 09-004-5847			K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information CONTACT 361-289-0300 EMERGENCY # ERG #171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAWNE			Signature Beth Pawne		Month Day Year 01119101	
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Ramiro Rodriguez			Signature Ramiro Rodriguez		Month Day Year 1119101	
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		Month Day Year	
19. Discrepancy Indication Space TECO WT = 38140 165						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name EMMET CARROLL			Signature Emmet Carroll		Month Day Year 111901	



1-07102499

Circle 101 or 102. (Form designed for use in either 12-pitch type or water.)

Form approved, OMB No. 2053-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TX D 008117186	Manifest Document No. 172008	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC P.O. BOX 4767 CORPUS CHRISTI, TX 78407				A. State Manifest Document Number 02340008			
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TX R 000029728		C. State Transporter's ID 85869		D. Transporter's Phone 361-387-7747	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address TEXAS ECOLOGIST, INC 3.5 MILES, PETRONILA RD ROBSTOWN, TEXAS 78380				10. US EPA ID Number TX D 069452340		G. State Facility's ID 50052	
				H. Facility's Phone 361-387-3518			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	13. Total Quantity	14. Unit (Wt/Vol)	15. Waste No.
a.	HAZARDOUS WASTE SOLID, NOS. 9 NA3077, PSIII (D006, D008)			001 DT	24855	P	00151319
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above CONT SOIL & CONCRETE TECO W/SH 09.004.5847				K. Handling Codes for Wastes Listed Above M111 / M132			
L. Special Handling Instructions and Additional Information CONTACT 361-289-0300 IN EMERGENCY ERG #171							
M. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE				Signature Beth Payne		Month Day Year 11/19/01	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature Roy Gore		Date 11/20/01	
Printed/Typed Name Roy Gore				Signature		Date	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date	
Printed/Typed Name				Signature		Date	
19. Discrepancy Indication Space TECO WT = 24,985 lbs							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Ernest Carls				Signature Ernest Carls		Date 11/21/01	

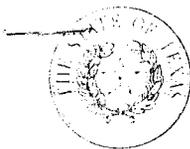


02/19/97

Please print or type. (Form designed for use on either 12-pin or typewriter.)

Form approved, CMB No. 2050-0039.

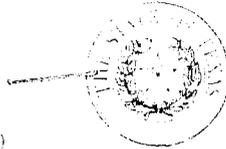
<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD00811718640009</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC P.O. Box 4767 CORPUS CHRISTI, TX 78407</b>				A. State Manifest Document Number <b>02340009</b>			
4. Generator's Phone (361) <b>289-0300</b>				B. State Generator's ID <b>30003</b>			
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>ITXR000029728</b>		C. State Transporter's ID <b>85869</b>			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone <b>361-387-7747</b>			
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGIST, INC 3.5 MILE S. PETRONILA RD ROBSTOWN, TEXAS 78380</b>		10. US EPA ID Number <b>ITXD069452340</b>		E. State Transporter's ID			
				F. Transporter's Phone			
				G. State Facility's ID <b>50052</b>			
				H. Facility's Phone <b>361-387-3518</b>			
11A. HMI	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.	
	<b>HAZARDOUS WASTE SOLID, NOS, CLASS 9, NA 3077, PGIII (D006, D008)</b>	<b>001</b>	<b>BT</b>	<b>41640</b>	<b>P</b>	<b>0015319H</b>	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above <b>METAL CONTAMINATED SOIL &amp; CONCRETE TECO W/S # 09.004.5847 Teco at 42280 lbs</b>				K. Handling Codes for Wastes Listed Above <b>M111 / M132</b>			
15. Special Handling Instructions and Additional Information <b>EMERGENCY CONTACT NUMBER 361-289-0300 ERG # 171</b>							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11 15 01</b>			
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <b>Emilia Ybarra</b>		Signature <i>Emilia Ybarra</i>		Month Day Year <b>11 15 01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name <b>Ernest Garza</b>		Signature <i>Ernest Garza</i>		Month Day Year <b>11 15 01</b>			



WOT 02455

Form approved, OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD0005117186140010	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address EUCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78407				A. State Manifest Document Number 02340010			
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869		D. Transporter's Phone 361-387-7747	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S. PETRONILA RD ROBSTOWN, TEXAS 78380				10. US EPA ID Number TXD069452340		G. State Facility's ID 50052	
				H. Facility's Phone 361-387-3518			
11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	13. Total Quantity	14. Unit (Wt./Vol)	15. Waste No.			
a. HAZARDOUS WASTE SOLID, LOS, 9, NA3071, P6III (D006, D008)	001 DT	36380	P	0015319H			
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above METAL CONTAMINATED WITH SOIL TECO W/S# 09-004-5847				K. Handling Codes for Wastes Listed Above M111/M132			
16. Special Handling Instructions and Additional Information EMERGENCY CONTACT NUMBER 361-289-0300 ERG#171							
19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/15/01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name K M CHAUVERA		Signature K M Chauvera		Month Day Year 11/16/01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space TECO wt 36,140 lbs							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name Ernest Garza		Signature Ernest Garza		Date 11/19/01			

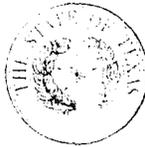


W07A-2515

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved, OMS No. 2050-9039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD008117186	Manifest Document No. 2515	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENZYCLE TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number <b>02340051</b>		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR001024728		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID 50052		H. Facility's Phone (361) 387-3518
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380			10. US EPA ID Number TXD008152310			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
	<del>1. BP NON-HAZARDOUS, NON-REGULATED</del>	<del>BP</del>	<del>DF</del>			<del>BP 00333904</del>
X	HAZARDOUS WASTE, SOLID, NOS, CLASS 9, NA3077, PG III (D006, D008)	001	CM	34770	P	0015319H
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <del>BP NH CONCRETE &amp; DEBRIS TECO W/S# 09-804-3647</del>			CONTAMINATED SOILS & CONCRETE TECO WT.		K. Handling Codes for Wastes Listed Above M111 / M132	
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG 3171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/21/01		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name MARIO RENDON		Signature Mario Rendon		Month Day Year 11/21/01		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
ENZYCLE TEXAS INC (RH)				Date		
Printed/Typed Name Ernest Garza		Signature Ernest Garza		Month Day Year 11/21/01		

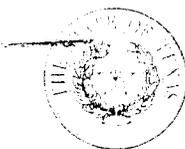


W0 # 25-11

base print or type. (Form designed for use on auto (12-bit) typewriter)

Form approved, OMB No. 1030-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD098117186</b>		2. Page 1 of 1		Manifest Document No. <b>40052</b>		information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>				A. State Manifest Document Number <b>02340052</b>		B. State Generator's ID <b>30003</b>			
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>				5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029728</b>		C. State Transporter's ID <b>85869</b>	
7. Transporter 2 Company Name				3. US EPA ID Number		D. Transporter's Phone <b>(361) 387-7747</b>		E. State Transporter's ID	
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>				10. US EPA ID Number <b>TXD069452340</b>		G. State Facility's ID <b>50052</b>		H. Facility's Phone <b>(361) 387-3518</b>	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.	
	<del>NON-HAZARDOUS, NON-REGULATED</del> <b>BP</b>			<del>201</del> <b>BP</b>	<del>DR</del>		<del>P</del>	<del>00333901</del> <b>BP</b>	
X	<b>HAZARDOUS WASTE SOLID, NOS, CLASS 9, NA 3077 (D006, D008)</b>			<b>001 CM</b>		<b>26420</b>	<b>P</b>	<b>0015319H</b>	
	c.								
	d.								
J. Additional Descriptions for Materials Listed Above <del>NIL CONCRETE &amp; DEBRIS</del> <del>TECO W/S# 09-004-3647 BP</del>				<b>CONTAMINATED SOIL &amp; CONCRETE</b> <b>TECO WT.</b> <b>09.004.5847</b>		K. Handling Codes for Wastes Listed Above <b>M III / M132</b>			
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b>									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name <b>BETH PAYNE</b>				Signature <i>Beth Payne</i>			Month Day Year <b>11/20/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name <i>Roy Garcia</i>			Signature <i>Roy Garcia</i>		
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name			Signature		
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name <i>Ernest Garcia</i>			Signature <i>Ernest Garcia</i>		
				Date <b>11/21/01</b>					

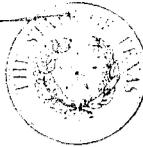


WO# 2575

Please print or type. (Form designed for use on white 112-pitch typewriter.)

Form approved, OMB No. 2050-3029.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD003117136	Manifest Document No. 2575	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number 02340055		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000000728		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID 50052		H. Facility's Phone (361) 387-3518
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN TEXAS 78320			10. US EPA ID Number TXD0069150310		I. Waste No.	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	13. Total Quantity	14. Unit (Wt/Vol)	15. Waste No.
	a. <del>NON HAZARDOUS, NON-REGULATED</del>		<del>001 BT</del>		P	<del>00533901</del>
	b. HAZARDOUS WASTE SOLID, ACS, 9, NA3077 PGIII (D006, D008)		001 CM	37015	P	0015319H
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above BP <del>CONCRETE &amp; DEBRIS</del> CONT. SOIL & CONCRETE TECO W/S# 09-004-3647 TECO W/S 09-004-5847			K. Handling Codes for Wastes Listed Above M111 / M132			
L. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERS #171						
M. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/20/01		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name MARIO RENDON		Signature Mario Rendon		Date 11/21/01		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name ERNEST CADIZ		Signature Ernest Cadiz		Date 11/21/01		



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved, OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD008117186	Manifest Document No.	2. Page 1 of 1	information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number <b>02340071</b>		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID 50052		H. Facility's Phone (361) 387-3518
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380			10. US EPA ID Number TXD0050483310			
GENERATOR	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit (Wt/Vol)	15. Waste No.
	a. HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)	001	DT	33840	P	0015319H
	b.					
	c.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847		K. Handling Codes for Wastes Listed Above TECO WT. 3516008 4/19/01			M132	
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11 11 01		
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name R M CHAVEZ		Signature R M Chavez		Month Day Year 11 19 01
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name Sam Mack		Signature S Mack		Date 11/19/01		

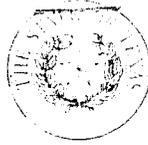


W0702935

Please print or type. (Form designed for use on single 110-pitch typewriter.)

Form approved, OMB No. 2050-0029.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340072</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone (361) 387-7747	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029728</b>		E. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		F. Transporter's Phone		
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD069452340</b>		G. State Facility's ID <b>50052</b>	
			H. Facility's Phone <b>(361) 387-3518</b>			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit (WT/VOL)	15. Waste No.
	<b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (E006, D008)</b>	<b>001</b>	<b>DT</b>	<b>38980</b>	<b>P</b>	<b>0015319H</b>
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847 TECO WT.</b>				K. Handling Codes for Wastes Listed Above <b>M111/M132</b>		
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Date <b>11/14/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>JAIME GARZA</b>		Signature <i>Jaime Garza</i>		Date <b>11/19/01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>ERNEST GARZA</b>		Signature <i>Ernest Garza</i>		Date <b>11/19/01</b>		



W0702485

Please print or type. (Form designed for use on either dot-matrix typewriter.)

Form approved: OMB No. 2050-0030.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340073</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone <b>(361) 387-7747</b>	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000020718</b>		E. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		F. Transporter's Phone		
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD059152310</b>		G. State Facility's ID <b>50052</b>	
H. Facility's Phone <b>(361) 387-3518</b>						
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit (Wt/Vol)
	a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>		001	DT	39380	P
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847 TECO WT.</b>			K. Handling Codes for Wastes Listed Above <b>M111/M132</b>			
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG#171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>			Signature <i>Beth Payne</i>		Date <b>11/14/01</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>Ramiro Rodriguez</b>			Signature <i>Ramiro Rodriguez</i>		Date <b>11/19/01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		Date	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Garcia</b>			Signature <i>Ernest Garcia</i>		Date <b>11/19/01</b>	



20702085

Please print or type. (Form designed for use on 11x17 (12-pitch) typewriter.)

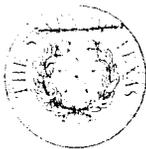
Form approved. CME No. 2050-0030.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD903117135	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number 02340074		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300 ATTN: BETH PAYNE			C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747	
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029738		E. State Transporter's ID		
7. Transporter 2 Company Name		3. US EPA ID Number		F. Transporter's Phone		
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380			10. US EPA ID Number TXD069452340		G. State Facility's ID 50052	
			H. Facility's Phone (361) 387-3518			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
	HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)		001	DT	40300	P
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847			K. Handling Codes for Wastes Listed Above M111/M132		TECO WT. 40,440 lb 11/19/01	
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG #171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the cost waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE			Signature Beth Payne		Month Day Year 11 14 01	
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Enrique Ybarra			Signature Enrique Ybarra		Month Day Year 11 19 01	
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Ernest Castro			Signature Ernest Castro		Month Day Year 11 19 01	

TEXAS NATURAL RESOURCE  
CONSERVATION COMMISSION

P.O. Box 10087

Austin, Texas 78711-3087

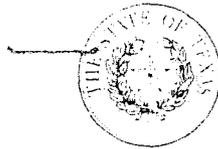


*W071 02485*

Please print or type. (Form designed for use on 8 1/2" (12-pitch) typewriter)

Form approved, OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4707 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340075</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone (361) 387-7747	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>			6. US EPA ID Number <b>TXR000000728</b>		E. State Transporter's ID	
7. Transporter 2 Company Name			8. US EPA ID Number		F. Transporter's Phone	
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD000450210</b>		G. State Facility's ID <b>50052</b>	
11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>			001	DT	40060	P
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>TECO WT. 39,580 lbs 11/14/01</b> <b>M111/M132</b>			
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG# 171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>			Signature <i>Beth Payne</i>		Month Day Year <b>11 11 01</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials			Date			
Printed/Typed Name <b>RW CRAVERA</b>			Signature <i>RW Cravera</i>		Month Day Year <b>11 11 01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials			Date			
Printed/Typed Name			Signature		Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Lopez</b>			Signature <i>Ernest Lopez</i>		Month Day Year <b>11 11 01</b>	

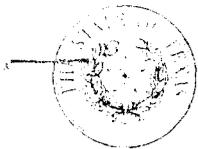


W07 2456

Please print or type. (Form designed for use on white (12-pitch) typewriter.)

Form approved. OMB No. 2050-0009

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD008117186	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407		ATTN: BETH PAYNE		A. State Manifest Document Number 02340076		
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003		
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000020723		C. State Transporter's ID 85869		
7. Transporter 2 Company Name -		3. US EPA ID Number		D. Transporter's Phone (361) 387-7747		
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD069452340		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID 50052		
				H. Facility's Phone (361) 387-3518		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.
	a. HAZARDOUS WASTE SOLID, NOS, 9, NA3077. PGIII (D006, D008)	001	DT	29120	P	0015319H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847				K. Handling Codes for Wastes Listed Above M111/M132		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300				ERG #171		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature <i>Beth Payne</i>		Month Day Year 11/12/01		
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <i>Ray Garcia</i>		Signature <i>Ray Garcia</i>		Month Day Year 11/14/01
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Date
Printed/Typed Name ERNEST GARZA		Signature <i>Ernest Garza</i>		Month Day Year 11/14/01		

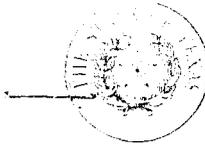


Track 031  
W07102456

Form approved: OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117136</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340077</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone <b>(361) 387-7747</b>	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029728</b>		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		3. US EPA ID Number		G. State Facility's ID <b>50052</b>		H. Facility's Phone <b>(361) 387-3518</b>
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD009151310</b>			
HA HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
	a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (E006, D008)</b>		001	DT	21,940	P
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>TECO WT. 21,460 lbs 11/14/01</b> <b>M111/M132</b>			
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>			Signature <i>Beth Payne</i>		Month Day Year <b>11/11/01</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <i>Abel Vela</i>			Signature <i>Abel Vela</i>		Month Day Year <b>11/11/01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name			Signature		Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <i>Ernest Garza</i>			Signature <i>Ernest Garza</i>		Month Day Year <b>11/11/01</b>	

GENERATOR OR TRANSPORTER FACILITY



W07# 2456

Please print or type. (Form designed for use on eight 11.2-inch typewriter)

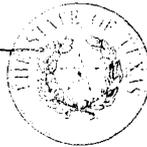
Form approved, OMB No. 2050-0029

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD003117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340078</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone (361) 387-7747	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029728</b>		E. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		F. Transporter's Phone		
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD069452340</b>		G. State Facility's ID <b>50052</b>	
					H. Facility's Phone <b>(361) 387-3518</b>	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol
	a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>		001	DT	2360	P
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>M111/M132</b>		TECO WT. <b>23,460 P &amp; 14/19</b>	
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11 11 201</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>MARIO RENCÓN</b>		Signature <i>Mario Rencón</i>		Date <b>11 14 01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Garza</b>		Signature <i>Ernest Garza</i>		Date <b>11 14 01</b>		

TRANSPORTER

FACILITY

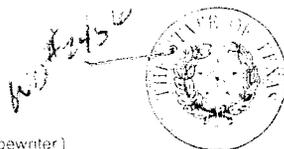
WO# 2156



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved: OMB No. 2050-0070

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117136</b>	Manifest Document No.	2. Page 1 of 1	information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340079</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone <b>(361) 387-7747</b>	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>			6. US EPA ID Number <b>TXR000020728</b>		E. State Transporter's ID	
7. Transporter 2 Company Name			3. US EPA ID Number		F. Transporter's Phone	
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD069452310</b>		G. State Facility's ID <b>50052</b>	
H. Facility's Phone <b>(361) 387-3518</b>						
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.
	a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>	<b>001</b>	<b>DT</b>	<b>35,680</b>	<b>P</b>	<b>0015319H</b>
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>TECO WT. 34,040# 8 11/14/01</b> <b>M111/M132</b>			
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11 14 01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>R M CHAVEZ</b>		Signature <i>R M Chavez</i>		Month Day Year <b>11 14 01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Garcia</b>		Signature <i>Ernest Garcia</i>		Date <b>11/14/01</b>		

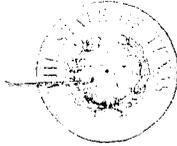


W07 2456

Reverse print or type (Form designed for use on elite 12-pitch) typewriter)

Form approved OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD003117136</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number <b>02340080</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0360 ATTN: BETH PAYNE			C. State Transporter's ID <b>85869</b>		D. Transporter's Phone (361) 387-7747	
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029723</b>		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID <b>50052</b>		H. Facility's Phone <b>(361) 387-3518</b>
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380			10. US EPA ID Number <b>TXD059452340</b>			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.
	HAZARDOUS WASTE SOLID, NOS, 9, NA3077, PGIII (D006, D008)		001	DT	48,000	P
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE</b> <b>TECO W/S# 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>TECO WT. 47,820# 8/1/90</b>		<b>M111/M132</b>	
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>			Signature <i>Beth Payne</i>		Month Day Year <b>11 11 2001</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature <i>Enrique Ybarra</i>		Date <b>11 11 2001</b>	
Printed/Typed Name <b>Enrique Ybarra</b>			Signature		Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials			Signature		Date	
Printed/Typed Name			Signature		Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Garza</b>			Signature <i>Ernest Garza</i>		Date <b>11 11 2001</b>	



W07 2456

Please print or type. (Form designed for use on elite (12-pin) typewriter.)

Form approved: OMB No. 2050-0029.

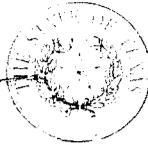
UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD008117136	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407		A. State Manifest Document Number <b>02340081</b>		B. State Generator's ID <b>30003</b>		
4. Generator's Phone (361) 389-0300		ATTN: BETH PAYNE		C. State Transporter's ID <b>85869</b>		
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXP000020728		D. Transporter's Phone (361) 387-7747		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD053152340		F. Transporter's Phone		
				G. State Facility's ID <b>50052</b>		
				H. Facility's Phone (361) 387-3518		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
	a. HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)	001	DT	40,400	P	0015319H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847 TECO WT. 40,400 <sup>lb</sup> 11/14/01				K. Handling Codes for Wastes Listed Above M111/M132		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 389-0300 ERG #171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/picarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11/11/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Ramiro Rodriguez</b>		Signature <i>Ramiro Rodriguez</i>		Date <b>11/14/01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Courtes</b>		Signature <i>Ernest Courtes</i>		Date <b>11/14/01</b>		



Please use this type of paper (Form designed for use on white (12-pitch) typewriter)

Form approved, OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117186</b>		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>				A. State Manifest Document Number <b>02340082</b>		B. State Generator's ID <b>30003</b>			
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>				5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029723</b>		C. State Transporter's ID <b>85869</b>	
				7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (361) 387-7747	
				9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 73380</b>		10. US EPA ID Number <b>TXD060452340</b>		E. State Transporter's ID	
								F. Transporter's Phone	
								G. State Facility's ID <b>50052</b>	
								H. Facility's Phone <b>(361) 387-3518</b>	
11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)					12. Containers No. Type		13. Total Quantity	14. Unit Wt./Vol	15. Waste No.
HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)					001 DT		45,880	P	0015319H
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>					K. Handling Codes for Wastes Listed Above <b>TECO WT. 45,880 8/1/91</b> <b>M111/M132</b>				
16. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG #171</b>									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name <b>BETH PAYNE</b>					Signature <i>Beth Payne</i>			Month Day Year <b>11/11/01</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name <b>Jaimie Garza</b>					Signature <i>Jaimie Garza</i>			Month Day Year <b>11/11/01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name					Signature			Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name <b>Ernest Garza</b>					Signature <i>Ernest Garza</i>			Month Day Year <b>11/14/01</b>	

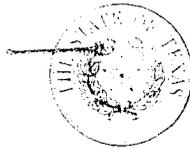


NOT 2458  
6255

Please print or type. (Form designed for use on auto (12-pitch) typewriter.)

Form approved OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD003117186	Manifest Document No.	2. Page 1 of 1	information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407		4. Generator's Phone (361) 289-0300 ATTN: BETH PAYNE		A. State Manifest Document Number 02340083		B. State Generator's ID 30003	
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000000728		C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD050453310		G. State Facility's ID 50052		H. Facility's Phone (361) 387-3518	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	15. Waste No.	
	a. HAZARDOUS WASTE SOLID, NOS, 9, NA3077, PGIII (D006, D008)	001	DT	46720	P	0015319H	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847				K. Handling Codes for Wastes Listed Above TECO WT. 45,820 P 11/7/01 M111/M132			
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG #171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/12/01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Ernest Garza		Signature Ernest Garza		Month Day Year 11/14/01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Ernest Garza		Signature Ernest Garza		Month Day Year 11/14/01			

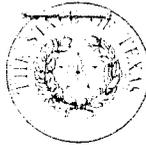


2072456

Form approved OMB No. 2050-0039

Please print or type. (Form designed for use on 9/16 (12-pitch) typewriter)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340084</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>			5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000029728</b>	C. State Transporter's ID <b>85869</b>
7. Transporter 2 Company Name			8. US EPA ID Number		D. Transporter's Phone (361) 387-7747	
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD069452340</b>		E. State Transporter's ID	
					F. Transporter's Phone	
					G. State Facility's ID <b>50052</b>	
					H. Facility's Phone <b>(361) 387-3518</b>	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.
	<b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>	<b>001</b>	<b>DT</b>	<b>40.740</b>	<b>P</b>	<b>0015319H</b>
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>				K. Handling Codes for Wastes Listed Above <b>TECO WT. 40,520 P 8/11/49</b> <b>M111/M132</b>		
15. Special Handling instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>B Payne</i>		Month Day Year <b>11/1/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>K M CHAUERA</b>		Signature <i>K M Chauera</i>		Month Day Year <b>11/1/01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name <b>Ernest Garza</b>		Signature <i>Ernest Garza</i>		Month Day Year <b>11/1/01</b>		



2485

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117136</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>		A. State Manifest Document Number <b>02340086</b>		B. State Generator's ID <b>30003</b>		
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID <b>85869</b>		
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000020728</b>		D. Transporter's Phone <b>(361) 387-7747</b>		
7. Transporter 2 Company Name		3. US EPA ID Number		E. State Transporter's ID		
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>		10. US EPA ID Number <b>TXD000150310</b>		F. Transporter's Phone		
				G. State Facility's ID <b>50052</b>		
				H. Facility's Phone <b>(361) 387-3518</b>		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	1. Waste No.
	a. <b>HAZARDOUS WASTE SOLID, NOS, 9, NA3077, PGIII (D006, D008)</b>	001	DT	35660	P	0015319H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>				K. Handling Codes for Wastes Listed Above <b>TECO WT. 35, 700P @ 11/19/01</b> <b>M111/M132</b>		
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b> <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11 14 01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <b>Jaime GARZA</b>		Signature <i>Jaime Garza</i>		Month Day Year <b>11 14 01</b>
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Date <b>11 19 01</b>		





12 07102 195

Form approved: OMB No. 2050-0039.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD008117186	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407		6. US EPA ID Number TXR000029728		A. State Manifest Document Number 02340088		
4. Generator's Phone (361) 289-0300 ATTN: BETH PAYNE		7. US EPA ID Number		B. State Generator's ID 30003		
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		8. US EPA ID Number		C. State Transporter's ID 85869		
7. Transporter 2 Company Name		9. US EPA ID Number		D. Transporter's Phone (361) 387-7747		
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD060452340		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID 50052		
				H. Facility's Phone (361) 387-3518		
11.A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit (M/L/Y/G)	15. Waste No.
a.	HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)	001	DT	42300	P	0015319H
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847 TECO WT. 42260 lb.				K. Handling Codes for Wastes Listed Above M111/M132		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG # 171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/14/01		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Jaime GARZA		Signature Jaime Garza		Date Month Day Year 11/19/01		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Date Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name ERNEST GARZA		Signature Ernest Garza		Date Month Day Year 11/19/01		

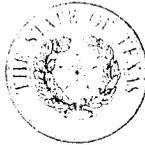


207102485

Please print or type. (Form designed for use on 2416 (12-01-01) typewriter.)

Form approved: OMB No. 2050-0020.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD008117185</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02340089</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID <b>85869</b>		
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TXR000020722</b>		D. Transporter's Phone <b>(361) 387-7747</b>		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>		10. US EPA ID Number		F. Transporter's Phone		
				G. State Facility's ID <b>50052</b>		
				H. Facility's Phone <b>(361) 387-3518</b>		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol I. Waste No.
	a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>		001	DT	37900	P <b>0015319H</b>
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>TECO WT. 38,020 1/2 M111/M132</b>			
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG#171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>			Signature <i>Beth Payne</i>		Month Day Year <b>11/19/01</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Ramiro Rodriguez</b>			Signature <i>Ramiro Rodriguez</i>		Date <b>11/19/01</b>	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name			Signature		Date	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name <b>Ernest Cohen</b>			Signature <i>Ernest Cohen</i>		Date <b>11/19/01</b>	

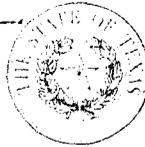


CO # 2515

Make print or type. (Form designed for use on 11-lb (12-pitch) typewriter.)

Form approved: OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD008117183	Manifest Document No. 2515	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340090				
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003				
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		5. US EPA ID Number TXR000029728		C. State Transporter's ID 85869				
7. Transporter 2 Company Name		3. US EPA ID Number		D. Transporter's Phone 361-387-7747				
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S. PETRONILA RD ROBSTOWN, TEXAS 78380		10. US EPA ID Number ITXD069452340		E. State Transporter's ID				
				F. Transporter's Phone				
				G. State Facility's ID 50052				
				H. Facility's Phone 361-387-3518				
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	Type	13. Total Quantitv	14. Unit Wt./Vol	I. Waste No.
X	HAZARDOUS WASTE SOLID, NOS, CLASS 9 A3077, PGIII (D006, D008)			001	CM	333/0	P	0015319 H
	b.							
	c.							
	d.							
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S # 09.004.5847					K. Handling Codes for Wastes Listed Above M111/M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300      ERG # 171								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway, according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.								
Printed/Typed Name BETH PAYNE				Signature <i>Beth Payne</i>		Month Day Year 11/20/01		
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Roy Garcia</i>		Date 11/21/01		
Printed/Typed Name Roy Garcia				Signature		Month Day Year		
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Date		
Printed/Typed Name				Signature		Month Day Year		
19. Discrepancy indication Space								
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Printed/Typed Name Ernest Garcia				Signature <i>Ernest Garcia</i>		Date 11/21/01		



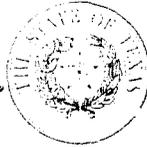
Truck # 031

LOT# 02574

Form approved, OMB No. 2050-0039.

Please print or type. (Form designed for use on eight (12-pitch) typewriter.)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD00811718640099	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340091				
4. Generator's Phone (361) 289-0300				B. State Generator's ID 30003				
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869				
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 361-387-7747				
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES SOUTH ON PETRONILA RD ROBSTOWN, TEXAS 73380		10. US EPA ID Number TXD069452340		E. State Transporter's ID				
				F. Transporter's Phone				
				G. State Facility's ID 50052				
				H. Facility's Phone 361-387-3518				
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	1. Waste No.
X	HAZARDOUS WASTE SOLID, NOS, CLASS 9 NA3077, PG III (D006, D008)			001	CM	23,140	?	0015319 H
	b.							
	c.							
	d.							
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S # 09.004.5847				K. Handling Codes for Wastes Listed Above M111 / M13Z TECO wt = 23,640 lb				
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300 Box 20-009								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that I can afford.								
Printed/Typed Name BETH DAYNE				Signature Beth Payne		Month Day Year 11 20 01		
17. Transporter 1 Acknowledgement of Receipt of Materials								
Printed/Typed Name Abel Vila				Signature Abel Vila		Month Day Year 11 21 01		
18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed/Typed Name				Signature		Month Day Year		
19. Discrepancy Indication Space								
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.								
Printed/Typed Name Ernest Garcia				Signature Ernest Garcia		Date 11/26/01		



607 02524

base print or type. (Form designed for use on elite (12-inch) typewriter.)

Form approved, OMB No. 2050-1039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD008117186195042	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340092			
4. Generator's Phone 361-289-0300				B. State Generator's ID 30003			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869		D. Transporter's Phone 361-387-7747	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES SOUTH ON PETRONILLA RD ROBSTOWN, TEXAS 78380				10. US EPA ID Number ITXD069452340		G. State Facility's ID 50052	
				H. Facility's Phone 361-387-3518			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)			12. Containers No.	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.
X	HAZARDOUS WASTE SOLID, NOS, CLASS 9, NA 3077, PG III (D006, D008)			001 CM	24160 P		0015319 H
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO w/s # 09.004.5847 Tecont = 24,160 lbs				K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300 Box EE 2012							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE				Signature Beth Payne		Month Day Year 11/26/01	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials				Date		
	Printed/Typed Name MARK RENDON		Signature Mark Rendon		Month Day Year 11/26/01		
FACILITY	18. Transporter 2 Acknowledgement of Receipt of Materials				Date		
	Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name Ernest Garcia				Signature Ernest Garcia		Month Day Year 11/26/01	



NOV 25 2001

Please print or type. (Form designed for use on 1100 (12-point) typewriter)

Form approved, OMB No. 0050-0029

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD0081 71864523		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address EUCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469						A. State Manifest Document Number 02340093					
4. Generator's Phone (361) 289-0300						B. State Generator's ID 30003					
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES			6. US EPA ID Number TXR000029728			C. State Transporter's ID 85869			D. Transporter's Phone 361-387-7747		
7. Transporter 2 Company Name						E. State Transporter's ID					
8. US EPA ID Number						F. Transporter's Phone					
9. Designated Facility Name and Site Address TEXAS ECOLOGIST, INC 3.5 MILES S PETROVILA ROAD ROBSTOWN, TEXAS 78380						10. US EPA ID Number TXD069452340			G. State Facility's ID 50052		
11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)						12. Containers No. Type		13. Total Quantity		14. Unit (Wt./Vol)	15. Waste No.
X a. HAZARDOUS WASTE SOLID, NOS, CLASS 9 NA3077, PGIII (D006, D008)						001 CM		21060		P	0015319 H
b.											
c.											
d.											
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S# 09.004.5847						K. Handling Codes for Wastes Listed Above M111 / M132 TECO wt = 21,260 lbs					
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300						ERG# 171 Roll-off # 25013					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that I can afford.											
Printed/Typed Name BETH RAUNE						Signature Beth Raune			Month Day Year 11 24 01		
17. Transporter 1 Acknowledgement of Receipt of Materials											
Printed/Typed Name Abel Vela						Signature Abel Vela			Month Day Year 11 20 01		
18. Transporter 2 Acknowledgement of Receipt of Materials											
Printed/Typed Name						Signature			Month Day Year		
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name Ernest Casera						Signature Ernest Casera			Month Day Year 11 20 01		

TEXAS NATURAL RESOURCE  
CONSERVATION COMMISSION

P.O. Box 13087  
Austin, Texas 78711-3087



2527

Please print or type. (Form designed for use on 12-inch typewriter.)

Form approved, OMS No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TX D 00 811 7186	Manifest Document No. 2527	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE / TEXAS, INC P.O. BOX 4767 CORPUS CHRISTI, TX 78469			A. State Manifest Document Number 02340094		B. State Generator's ID 30003		
4. Generator's Phone 361-289-0300		5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TX R 00 00 29 928		C. State Transporter's ID 85819	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 361-387-7747		E. State Transporter's ID	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S PETROWILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TX D 0 69 4 52 340		G. State Facility's ID 50052		H. Facility's Phone 361-387-3518	
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol.	15. Waste No.	
X	a. HAZARDOUS WASTE SOLID, NOS, CLASS 9, NA 3077, PG III (D006, D008)	001	CM	31480	P	0015319 H	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S # 09-004-5847 Tecont = 31,300 lbs				K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300 Re Hoff # 274650 ERG # 171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11 26 01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name MARIO RENDON		Signature Mario Rendon		Month Day Year 11 26 01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Ernest Carr		Signature Ernest Carr		Month Day Year 11 26 01			

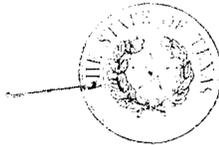


7700K 031

Form approved: DMB No. 7050-0039.

Use print or type. Form designed for use on elite (12-pin) typewriter.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TX D00511718645045		Manifest Documents <b>15</b>		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS P.O. BOX 4767 CORPUS CHRISTI, TX 78469						A. State Manifest Document Number 02340095			
4. Generator's Phone (361) 289-0300						B. State Generator's ID 30003			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES			6. US EPA ID Number TX R000029728		C. State Transporter's ID 85869				
7. Transporter 2 Company Name			8. US EPA ID Number		D. Transporter's Phone 361-387-7747				
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S PETROVILA ROAD ROBSTOWN, TEXAS 73380			10. US EPA ID Number TX D069452340		E. State Transporter's ID				
						F. Transporter's Phone			
						G. State Facility's ID 50052			
						H. Facility's Phone 361-387-3518			
HA HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)				12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	1. Waste No.
X	HAZARDOUS WASTE SOLID, NOS, CLASS 9, NA 3077, PG III (D006, D008)				001	KM	30460	P	0015319 H
	b.								
	c.								
	d.								
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S # 09-004-5847 Tercout = 29,960 lbs						K. Handling Codes for Wastes Listed Above M111 / M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300 ERG # 171 Rolloff # 274427									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the best waste management method that is available to me and that I can afford.									
Printed/Typed Name BETH PAYNE				Signature Beth Payne			Month Day Year 11 26 01		
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name Abel Vila				Signature Abel Vila			Month Day Year 11 26 01		
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name				Signature			Month Day Year		
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.									
Printed/Typed Name Ernest (99128)				Signature Ernest			Month Day Year 11 26 01		

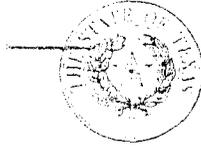


W07# 2524

Form approved, OMB No. 1050-0089

Use print or type. (Form designed for use on 11x12-inch typewriter.)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD00811718670098	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC P.O. BOX 4767 CORPUS CHRISTI, TX 78469				A. State Manifest Document Number 02340096			
4. Generator's Phone (361) 289-0300		6. US EPA ID Number TXR000029728		C. State Transporter's ID 85869			
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		7. Transporter 2 Company Name		D. Transporter's Phone 361-387-7747		E. State Transporter's ID	
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC 3.5 MILES S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD069452340		F. Transporter's Phone		G. State Facility's ID 50052	
				H. Facility's Phone 361-387-3518			
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	I. Waste No.	
X	a. HAZARDOUS WASTE SOLID, ACS. CLASS 9, NA3077, PGIII (D006, D008)	001	CM	33910	P	0015319 #	
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above CONTAMINATED SOIL & CONCRETE TECO W/S # 09-004-5847 Teco wt = 32,880 lbs				K. Handling Codes for Wastes Listed Above MIII / M132			
15. Special Handling Instructions and Additional Information EMERGENCY # 361-289-0300 Roll-off # 274676 ERG # 171							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11 12 01			
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Mario Pardo		Signature Mario Pardo		Month Day Year 11 26 01			
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name Ernest Garcia		Signature Ernest Garcia		Month Day Year 11 26 01			



40# 2637

Please print or type. (Form designed for use on elite (12-bit) typewriter.)

Form approved. OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD000811718612149	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE / TEXAS, INC. P.O. BOX 4767 COSPOS CHRISTI, TX 78407				A. State Manifest Document Number 02542149		
4. Generator's Phone (361) 289-1300				B. State Generator's ID 3003		
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number ITYR000029728		C. State Transporter's ID 85869		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (361) 387-7747		
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number ITYD0069452340		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID 50052		
				H. Facility's Phone (361) 387-3518		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol
	a. HAZARDOUS WASTE SOLID, NOS, 9, NA 3077, PG III (DOCK, DOCS)		001	CM DT	4, 120 P	0015319H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECC W/S #09-004-5847 TECC WT.				K. Handling Codes for Wastes Listed Above MIII / M132		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT (361) 289-0300 ATTN: BETH PAYNE ERG #171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Jill A Albert		Signature Jill A. Albert		Month Day Year 11/20/01		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Buster Pritchett		Signature Buster Pritchett		Date 12/07/01		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name Ernest Car 29		Signature Ernest Car 29		Date 12/07/01		

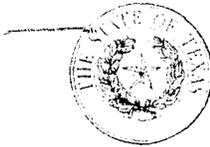


*J. Payne  
 11/15/01*

Form approved, OMS No. 2050-0039.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TX D008117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>ENCYCLO/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			A. State Manifest Document Number <b>02559901</b>		B. State Generator's ID <b>30003</b>	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID <b>85869</b>		D. Transporter's Phone (361) 387-7747
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>		6. US EPA ID Number <b>TX R000020728</b>		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID <b>50052</b>		H. Facility's Phone <b>(361) 387-3518</b>
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBERTSON TEXAS 78380</b>		10. US EPA ID Number <b>TX D0000152310</b>		I. Waste No. <b>0015319H</b>		
11A. FM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
	a. <b>HAZARDOUS WASTE SOLID, NOS. 2, NA3077, PGIII (D006, D008)</b>	001	DT	42 700	P	0015319H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S# 09-004-5847</b>				K. Handling Codes for Wastes Listed Above <b>M111/M132</b>		
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b>				<b>ERG #171</b>		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11/15/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name <b>Ramiro Rodriguez</b>		Signature <i>Ramiro Rodriguez</i>		Month Day Year <b>11/14/01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Garcia</b>		Signature <i>Ernest Garcia</i>		Month Day Year <b>11/15/01</b>		

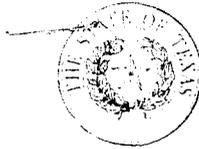


W# 2462

Please print or type. (Form designed for use on eight (12-pitch) typewriter.)

Form approved. OMB No. 2050-0039.

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>TXD003117186</b>	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address <b>ENCICLE TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407</b>			4. Generator's Phone (361) 289-0300 <b>ATTN: BETH PAYNE</b>		A. State Manifest Document Number <b>02559902</b>		
5. Transporter 1 Company Name <b>ABSOLUTE INDUSTRIES</b>			6. US EPA ID Number <b>TXR000029738</b>		C. State Transporter's ID <b>85869</b>		
7. Transporter 2 Company Name			8. US EPA ID Number		D. Transporter's Phone (361) 387-7747		
9. Designated Facility Name and Site Address <b>TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380</b>			10. US EPA ID Number <b>TXD009452310</b>		E. State Transporter's ID		
					F. Transporter's Phone		
					G. State Facility's ID <b>50052</b>		
					H. Facility's Phone <b>(361) 387-3518</b>		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
	a. <b>HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)</b>		001	DT	38600	P	0015319H
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above <b>METAL CONT. SOIL &amp; CONCRETE TECO W/S # 09-004-5847</b>			K. Handling Codes for Wastes Listed Above <b>TECO WT. 36,840 P @ 11/29/01</b>		M111/M132U		
15. Special Handling Instructions and Additional Information <b>IN CASE OF EMERGENCY CONTACT: (361) 289-0300</b>							<b>ERG #171</b>
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name <b>BETH PAYNE</b>			Signature <i>Beth Payne</i>		Month Day Year <b>11/11/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials			Date				
Printed/Typed Name <b>Jemie Garza</b>			Signature <i>Jemie Garza</i>		Month Day Year <b>11/11/01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials			Date				
Printed/Typed Name			Signature		Month Day Year		
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name <b>Ernest Garcia</b>			Signature <i>Ernest Garcia</i>		Date <b>11/11/01</b>		



Woff 2402

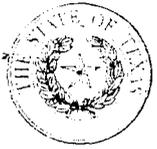
ease print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TXD008117186	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number 02559903		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000000728		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID 50052		H. Facility's Phone (361) 387-3518
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number		G. State Facility's ID		H. Facility's Phone
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt./Vol	I. Waste No.
	a. HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)	001	DT	43 840	P	0015319H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09-004-5847				K. Handling Codes for Wastes Listed Above M111/M132		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 289-0300 ERG #171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11/11/2011		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Ramiro Rodriguez		Signature Ramiro Rodriguez		Date 11/15/11		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name Sam Clark		Signature Sam Clark		Date 11/15/11		

GENERATOR  
TRANSPORTER  
FACILITY

W# 11402



Use plain or type. (Form designed for use on elite (12-pitch) typewriter.)

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. TXD003117136	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address ENCYCLE/TEXAS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78407			A. State Manifest Document Number 02559904		B. State Generator's ID 30003	
4. Generator's Phone (361) 289-0300		ATTN: BETH PAYNE		C. State Transporter's ID 85869		D. Transporter's Phone (361) 387-7747
5. Transporter 1 Company Name ABSOLUTE INDUSTRIES		6. US EPA ID Number TXR000029728		E. State Transporter's ID		F. Transporter's Phone
7. Transporter 2 Company Name		8. US EPA ID Number		G. State Facility's ID 50052		H. Facility's Phone (361) 387-3518
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROBSTOWN, TEXAS 78380		10. US EPA ID Number TXD0069452340		I. Waste No. 0015319H		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group) HAZARDOUS WASTE SOLID, NOS. 9, NA3077, PGIII (D006, D008)	12. Containers No.	Type	13. Total Quantity 38980	14. Unit Wt./Vol. P	
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above METAL CONT. SOIL & CONCRETE TECO W/S# 09.004.5847			38,980 & TECO WT <del>32740</del> P 11/15/01		K. Handling Codes for Wastes Listed Above M1, M13	
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT (361) 289-0300 ERS#171						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name BETH PAYNE		Signature Beth Payne		Month Day Year 11 11 01		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Jaime Parza		Signature Jaime Parza		Month Day Year 11 15 01		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name Sam Clark		Signature S. Clark		Month Day Year 11 11 01		



not 02485

Form approved. OMB No. 2050-0039.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. TX 0000000000	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address TEXAS ECOLOGISTS, INC. P.O. BOX 4767 CORPUS CHRISTI, TX 78401				A. State Manifest Document Number <b>02559905</b>		
4. Generator's Phone ( ) 361-0300 ATTN: BETH PAYNE				B. State Generator's ID 30003		
5. Transporter 1 Company Name SOLID INDUSTRIES		6. US EPA ID Number TX R 0000000000		C. State Transporter's ID 85809		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (361) 387-7747		
9. Designated Facility Name and Site Address TEXAS ECOLOGISTS, INC. 3 1/2 MILE S. PETRONILA ROAD ROASTOWN, TEXAS 75880		10. US EPA ID Number		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID 50032		
				H. Facility's Phone (361) 387-7747		
11A. HM	11. US DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group)	12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
	a. HAZARDOUS WASTE SOLID, NON-FLAMMABLE TECO W/S# 09-004-5847	001	U1	44.200		0015519H
	b.					
	c.					
	d.					
J. Additional Descriptions for Materials Listed Above MIXED CONT. SOIL & CONCRETE TECO W/S# 09-004-5847				K. Handling Codes for Wastes Listed Above M111A113		
15. Special Handling Instructions and Additional Information IN CASE OF EMERGENCY CONTACT: (361) 387-0300 <b>ERG #171</b>						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labelled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, including applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name <b>BETH PAYNE</b>		Signature <i>Beth Payne</i>		Month Day Year <b>11/1/01</b>		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Enrique Ybarra</b>		Signature <i>Enrique Ybarra</i>		Date <b>11/19/01</b>		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <b>Ernest Garcia</b>		Signature <i>Ernest Garcia</i>		Date <b>11/19/01</b>		



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**Appendix E**

Monitor Well Top of Casing Survey  
Data



**TELEFAX TRANSMITTAL LETTER**

**DATE:** 01/02/02 **PROJECT NO.:** 01301-500

**PAGES SENT (INCLUDING COVER SHEET):** 2

**RECIPIENT:** Ken Brandner

**COMPANY:** ARCADIS G&M

**FAX NO.:** 883-7565

**ATTACHMENTS:** Table of elevations on Encycle/Texas monitoring wells.

**REMARKS:** The attached list includes the recently completed MW-12.

IF THERE IS ANY PROBLEM WITH THE QUALITY OR QUANTITY OF THIS TRANSMISSION, PLEASE CALL: (361) 289-1385, AS SOON AS POSSIBLE.

cc: File

SIGNED

  
**J. L. CHATHAM** Chief of Surveys



## ENCYCLE MONITOR WELLS

WELL NO.	NGVD '29 ELEV.
MW-02	5.55
MW-03	9.95
MW-04	6.28
MW-05	8.81
MW-06	8.72
MW-07	26.95
MW-08	7.39
MW-09	4.44
MW-10	7.44
MW-11	25.98
MW-12	26.63
MW-13	27.47
MW-14	27.14
MW-15	22.71
MW-16	27.05
MW-17	26.87
MW-18	24.01
MW-19	23.63
MW-20	23.82
MW-21	23.58

**APPENDIX F**



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**Appendix F**

Groundwater Elevation Contour  
Map – Circle K/Up River





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**Appendix G**

Aquifer Test Data

## Aquifer Test Data - Monitor Well MW-7 Aquifer Test Conducted July 24, 2000

WELL: MW-7 (PUMPING WELL)  
 DATE: 7/24/2000  
 S.W.L.: 21.16 feet (before pumping)

TIME	Cumulative Time (t) Since Start of Pumping (minutes)	Depth to Water (feet)	Drawdown (feet)	REMARKS
800	---	21.16	---	Static water level (SWL).
<b><u>Pumping Phase</u></b>				
810	0	21.16	0	Start Pump @ 2 gallons per minute (gpm).
812	2	22.45	1.29	Maintain flow rate (Q) at 2 gpm during 6-hour
813	3	22.68	1.52	pumping phase.
814	4	22.85	1.69	
815	5	23.02	1.86	
816	6	23.05	1.89	
817	7	23.11	1.95	
818	8	23.13	1.97	
819	9	23.17	2.01	
820	10	23.18	2.02	
821	11	23.19	2.03	
822	12	23.19	2.03	
823	13	23.25	2.09	
824	14	23.28	2.12	
825	15	23.29	2.13	
830	20	23.73	2.57	
835	25	23.55	2.39	
840	30	23.59	2.43	
845	35	23.65	2.49	
850	40	23.71	2.55	
855	45	23.82	2.66	
900	50	23.62	2.46	
905	55	23.66	2.50	
910	60	23.64	2.48	
915	65	23.95	2.79	
925	75	24.04	2.88	
940	90	24.13	2.97	
955	105	24.22	3.06	
1010	120	24.29	3.13	
1027	137	24.31	3.15	
1040	150	24.35	3.19	
1055	165	24.40	3.24	
1110	180	24.44	3.28	
1140	210	24.54	3.38	
1210	240	24.58	3.42	
1240	270	24.63	3.47	
1310	300	24.71	3.55	
1340	330	24.75	3.59	
1410	360	24.82	3.66	Q = 2.0 gpm; end pumping phase.

**Aquifer Test Data - Monitor Well MW-7 Aquifer Test Conducted July 24, 2000**

WELL: MW-7 (PUMPING WELL)  
 DATE: 7/24/2000  
 S.W.L.: 21.16 feet (before pumping)

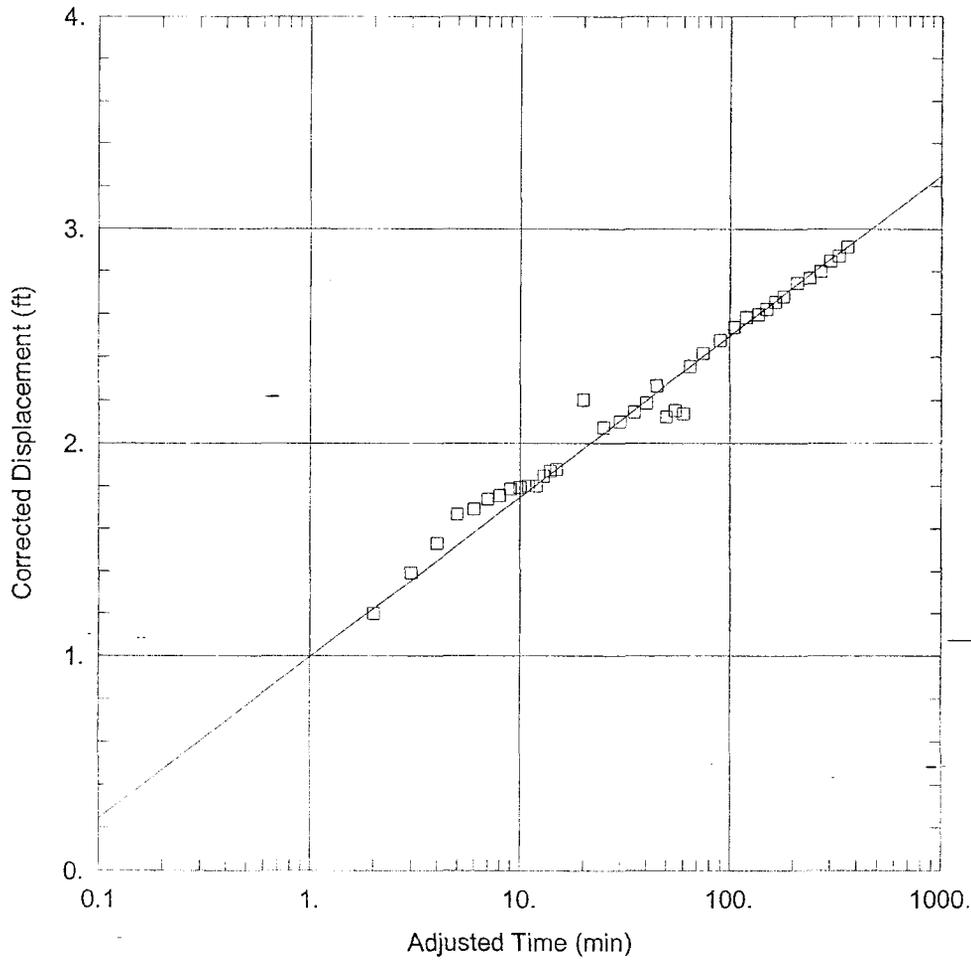
TIME	Cumulative Time (t) Since Start of Pumping (minutes)	Depth to Water (feet)	Drawdown (feet)	REMARKS
<b>Recovery Phase</b>				
1410	360	24.82	3.66	Turn pump off - begin 6-hour recovery phase.
1410.5	360.5	23.89	2.73	
1411	361	23.20	2.04	
1411.5	361.5	22.64	1.48	
1412	362	22.33	1.17	
1412.5	362.5	22.05	0.89	
1413	363	21.82	0.66	
1413.5	363.5	21.69	0.53	
1414	364	21.64	0.48	
1415	365	21.48	0.32	
1416	366	21.38	0.22	
1417	367	21.34	0.18	
1418	368	21.31	0.15	
1419	369	21.29	0.13	
1420	370	21.28	0.12	
1422	372	21.26	0.10	
1424	374	21.25	0.09	
1426	376	21.23	0.07	
1428	378	21.23	0.07	
1430	380	21.23	0.07	
1435	385	21.23	0.07	
1440	390	21.23	0.07	
1445	395	21.23	0.07	
1450	400	21.22	0.06	
1455	405	21.22	0.06	
1500	410	21.21	0.05	
1505	415	21.20	0.04	
1510	420	21.19	0.03	
1520	430	21.18	0.02	
1530	440	21.17	0.01	
1540	450	21.17	0.01	
1550	460	21.17	0.01	
1600	470	21.17	0.01	
1610	480	21.17	0.01	
1625	495	21.17	0.01	
1640	510	21.16	0	
1655	525	21.15	-0.01	
1710	540	21.15	-0.01	
1725	555	21.16	0	
1740	570	21.16	0	
1755	585	21.17	0.01	
1810	600	21.17	0.01	
1825	615	21.17	0.01	

**Aquifer Test Data - Monitor Well MW-7 Aquifer Test Conducted July 24, 2000**

WELL: MW-7 (PUMPING WELL)  
 DATE: 7/24/2000  
 S.W.L.: 21.16 feet (before pumping)

---

TIME	Cumulative Time (t)		Depth to Water (feet)	Drawdown (feet)	REMARKS
	Since Start of Pumping (minutes)				
1840	630		21.17	0.01	
1855	645		21.17	0.01	
1910	660		21.16	0	
1925	675		21.16	0	
1940	690		21.16	0	
1955	705		21.17	0.01	
2010	720		21.17	0.01	End recovery phase.



**MW-7 AQUIFER TEST - DRAWDOWN - ENCYCLE RFI**

Data Set: G:\Active Projects\Encycle\642.0001\Pumping Tests\MW-7 DD.aqt  
 Date: 05/16/02 Time: 10:43:15

**PROJECT INFORMATION**

Company: ARCADIS G & M  
 Client: Encycle  
 Project: CC000642.0001  
 Test Location: Corpus Christi, TX  
 Test Well: MW-7  
 Test Date: 7-24-00

**AQUIFER DATA**

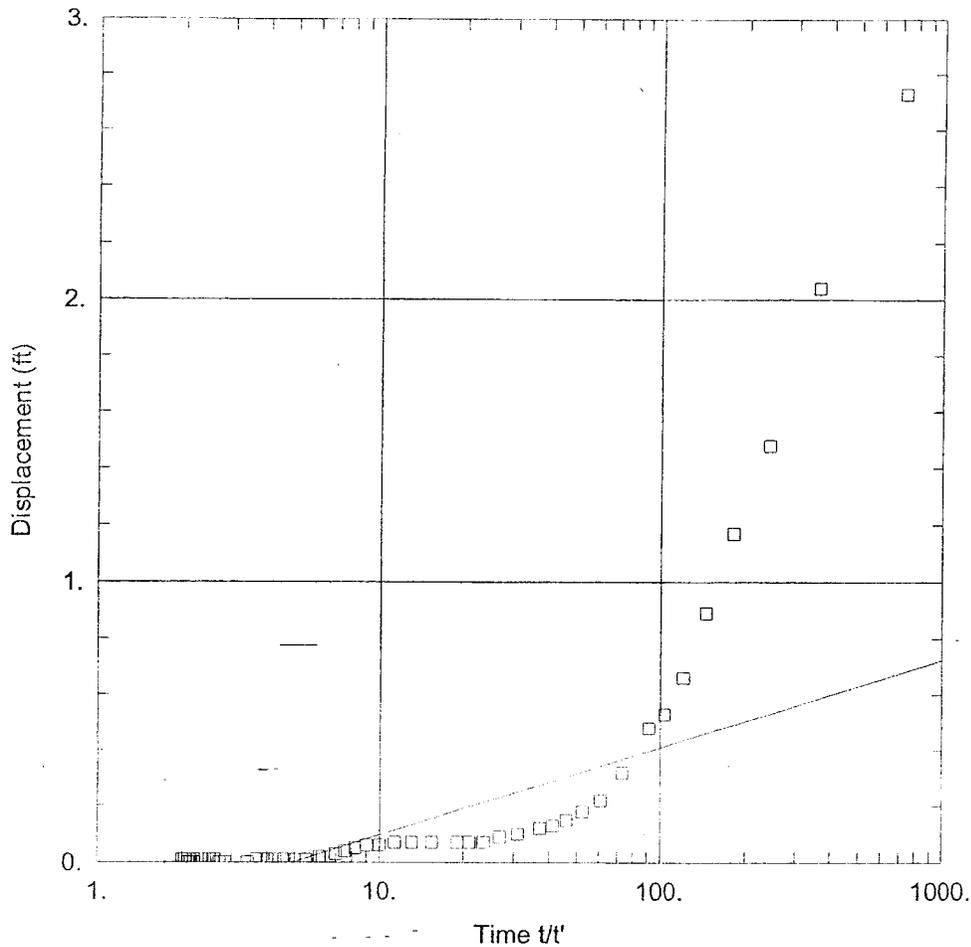
Saturated Thickness: 9. ft Anisotropy Ratio (Kz/Kr): 0.5

**WELL DATA**

Pumping Wells			Observation Wells		
Well Name	X (ft)	Y (ft)	Well Name	X (ft)	Y (ft)
MW-7	0	0	□ MW-7	0	0.46

**SOLUTION**

Aquifer Model: Unconfined Solution Method: Cooper-Jacob  
 T = 702. gal/day/ft



**MW-7 AQUIFER TEST - RECOVERY - ENCYCLE RFI**

Data Set: G:\Active Projects\Encycle\642.0001\Pumping Tests\MW-7 REC.aqt  
 Date: 05/16/02 Time: 11:23:40

PROJECT INFORMATION

Company: ARCADIS G & M  
 Client: Encycle  
 Project: CC000642.0001  
 Test Location: Corpus Christi, TX  
 Test Well: MW-7  
 Test Date: 7-24-00

AQUIFER DATA

Saturated Thickness: 9. ft Anisotropy Ratio (Kz/Kr): 0.5

WELL DATA

Pumping Wells			Observation Wells		
Well Name	X (ft)	Y (ft)	Well Name	X (ft)	Y (ft)
MW-7	0	0	□ MW-7	0	0.46

SOLUTION

Solution Method: Theis (Recovery)

T = 1681.9 gal/day/ft

Aquifer Test Data - Monitor Well MW-6 Aquifer Test Conducted July 26, 2000

WELL: MW-6 (PUMPING WELL)  
 DATE: 7/26/00  
 S.W.L. 7.64 feet (before pumping)

OBS WELL: MW-4 (Tidal fluctuation monitoring)

Time	Cumulative Time (t) Since Start of Pumping (minutes)	Depth to Water (feet)	Tidal Effect Correction (feet) <sup>a</sup>	Corrected Depth to Water (feet) <sup>b</sup>	Corrected Drawdown (feet)	Remarks
800	---	7.64	---	---	---	Static water level (SWL).
<b><u>Pumping Phase</u></b>						
815	0	7.64	0	7.64	0	Start pump @ 0.25 gpm.
816	1	8.39	0	8.39	0.75	Maintain flow rate at 0.25 gpm during 6-hour pumping phase.
817	2	8.58	0	8.58	0.94	
818	3	8.62	0	8.62	0.98	
819	4	8.77	0	8.77	1.13	
820	5	8.84	0	8.84	1.20	
821.5	6.5	8.86	0	8.86	1.22	
822	7	8.92	0	8.92	1.28	
823	8	9.00	0	9.00	1.36	
824	9	9.02	0	9.02	1.38	
825	10	9.09	0	9.09	1.45	
827	12	9.20	+0.01	9.21	1.57	
829	14	9.28	+0.01	9.29	1.65	
831	16	9.32	+0.01	9.33	1.69	
833	18	9.38	+0.01	9.39	1.75	
835	20	9.48	+0.01	9.49	1.85	
837	22	9.50	+0.01	9.51	1.87	
839	24	9.55	+0.01	9.56	1.92	
841	26	9.62	+0.01	9.63	1.99	
843	28	9.66	+0.01	9.67	2.03	
845	30	9.72	+0.01	9.73	2.09	
850	35	9.78	+0.01	9.79	2.15	
855	40	9.86	+0.01	9.87	2.23	
900	45	9.95	+0.02	9.97	2.33	
905	50	9.98	+0.02	10.00	2.36	
915	60	10.07	+0.02	10.09	2.45	
925	70	10.38	+0.03	10.41	2.77	
935	80	10.50	+0.03	10.53	2.89	
945	90	10.72	+0.04	10.76	3.12	
955	100	10.91	+0.04	10.95	3.31	
1005	110	11.13	+0.03	11.16	3.52	
1015	120	11.34	+0.03	11.37	3.73	
1030	135	11.46	+0.03	11.49	3.85	
1045	150	11.56	+0.03	11.59	3.95	
1100	165	11.62	+0.04	11.66	4.02	
1115	180	11.68	+0.05	11.73	4.09	
1145	210	11.96	+0.07	12.03	4.39	
1230	255	11.66	+0.09	11.75	4.11	
1300	285	11.96	+0.12	12.08	4.44	
1330	315	12.53	+0.14	12.67	5.03	

Aquifer Test Data - Monitor Well MW-6 Aquifer Test Conducted July 26, 2000

WELL: MW-6 (PUMPING WELL)  
 DATE: 7/26/00  
 S.W.L. 7.64 feet (before pumping)

OBS WELL: MW-4 (Tidal fluctuation monitoring)

Time	Cumulative Time (t) Since Start of Pumping (minutes)	Depth to Water (feet)	Tidal Effect Correction (feet) <sup>a</sup>	Corrected Depth to Water (feet) <sup>b</sup>	Corrected Drawdown (feet)	Remarks
1400	345	12.83	+0.14	12.97	5.33	
1415	360	12.88	+0.14	13.02	5.38	Q=0.25 gpm; end pumping phase.
<b>Recovery Phase</b>						
1415	360	12.88	+0.14	13.02	5.38	Turn pump off; begin 6-hour recovery phase.
1415.5	360.5	12.65	+0.14	12.79	5.15	
1416	361	12.58	+0.14	12.72	5.08	
1416.5	361.5	12.51	+0.14	12.65	5.01	
1417	362	12.48	+0.14	12.62	4.98	
1417.5	362.5	12.37	+0.14	12.51	4.87	
1418	363	12.33	+0.14	12.47	4.83	
1418.5	363.5	12.28	+0.14	12.42	4.78	
1419	364	12.21	+0.14	12.35	4.71	
1419.5	364.5	12.13	+0.14	12.27	4.63	
1420	365	12.03	+0.14	12.17	4.53	
1421	366	11.92	+0.14	12.06	4.42	
1422	367	11.85	+0.14	11.99	4.35	
1423	368	11.77	+0.14	11.91	4.27	
1424	369	11.62	+0.14	11.76	4.12	
1425	370	11.52	+0.14	11.66	4.02	
1427	372	11.42	+0.14	11.56	3.92	
1429	374	11.32	+0.14	11.46	3.82	
1431	376	11.22	+0.14	11.36	3.72	
1433	378	11.08	+0.14	11.22	3.58	
1435	380	10.95	+0.14	11.09	3.45	
1440	385	10.69	+0.14	10.83	3.19	
1445	390	10.45	+0.14	10.59	2.95	
1450	395	10.30	+0.14	10.44	2.80	
1455	400	10.13	+0.14	10.27	2.63	
1500	405	9.92	+0.14	10.06	2.42	
1505	410	9.73	+0.14	9.87	2.23	
1510	415	9.63	+0.14	9.77	2.13	
1515	420	9.55	+0.14	9.69	2.05	
1530	435	9.34	+0.14	9.48	1.84	
1545	450	9.15	+0.13	9.28	1.64	
1600	465	8.92	+0.13	9.05	1.41	
1615	480	8.84	+0.13	8.97	1.33	
1630	495	8.68	+0.12	8.80	1.16	
1645	510	8.65	+0.11	8.76	1.12	
1700	525	8.56	+0.1	8.66	1.02	
1715	540	8.52	+0.1	8.62	0.98	
1745	570	8.46	+0.1	8.56	0.92	

Aquifer Test Data - Monitor Well MW-6 Aquifer Test Conducted July 26, 2000

WELL: MW-6 (PUMPING WELL)  
 DATE: 7/26/00  
 S.W.L. 7.64 feet (before pumping)

OBS WELL: MW-4 (Tidal fluctuation monitoring)

Time	Cumulative Time (t) Since Start of Pumping (minutes)	Depth to Water (feet)	Tidal Effect Correction (feet) <sup>a</sup>	Corrected Depth to Water (feet) <sup>b</sup>	Corrected Drawdown (feet)	Remarks
1815	600	8.38	+0.09	8.47	0.83	
1845	630	8.32	+0.07	8.39	0.75	
1915	660	8.31	+0.06	8.37	0.73	
1945	690	8.29	+0.03	8.32	0.68	
2015	720	8.27	-0.01	8.26	0.62	End of test.

LEGEND

gpm Gallons per minute

Q Groundwater flow rate

a As detailed in the approved RFI Work Plan, monitor well MW-6 is located within 25 feet of the Corpus Christi Ship Channel. Water levels in the MW-6 well bore are therefore subject to tidal influences. Observation well MW-4, completed in the same shallow water-bearing unit as monitor well MW-6, was used as an observation well to determine tidal influences during the MW-6 aquifer test. Monitor well MW-4 is located over 1,000 feet from monitor well MW-6 and is beyond the radius of influence created in the uppermost water-bearing unit by pumping of monitor well MW-6.

b Depth to water in pumping well MW-6 corrected for tidal influence by adding the rise in water level in observation well MW-4 during the pumping test.

Aquifer Test Data - Observation Well MW-4 Water Level Data during Aquifer Test Conducted July 26, 2000

WELL: MW-4 (Observation Well during MW-6 Aquifer Test for Tidal Fluctuation Monitoring)

DATE: 7/26/00

S.W.L. 5.16 feet (before start of pumping test)

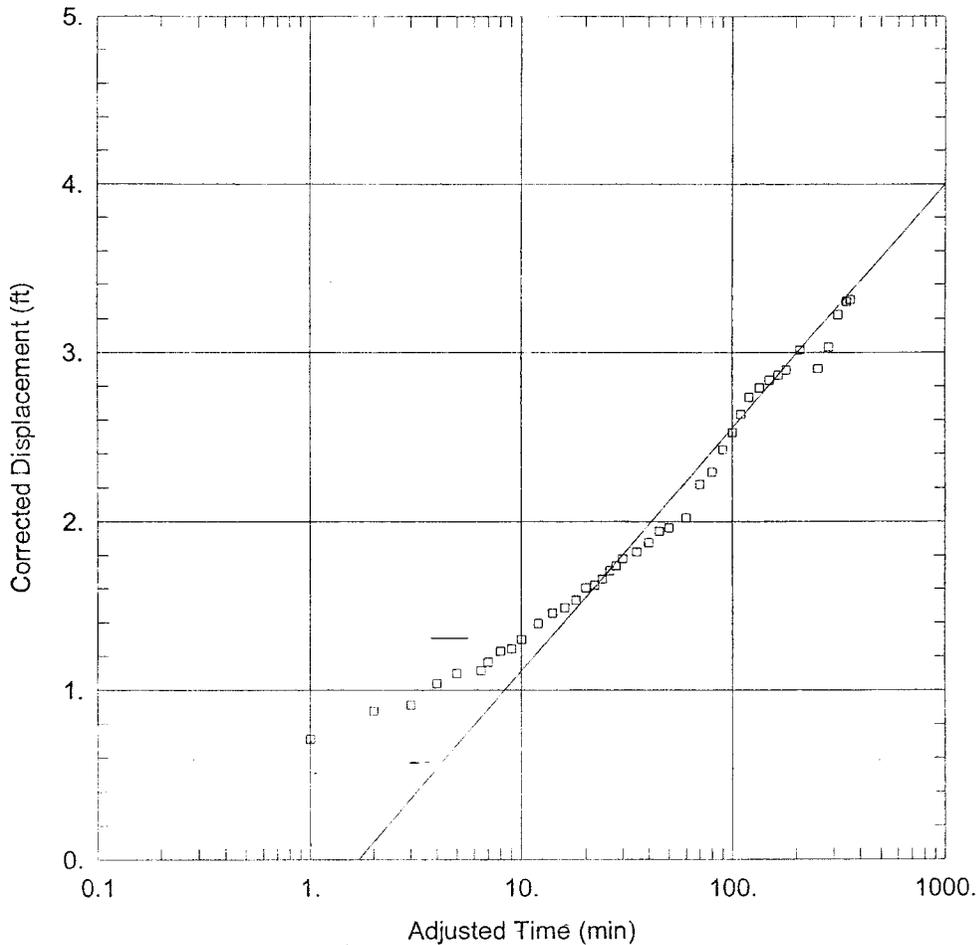
TIME	Cumulative Time (t) Since Start of Pumping (minutes)	Depth to Water (feet)	Tidal Effect Correction (feet) <sup>a</sup>	REMARKS
759	---	5.16	---	Static water level (SWL).
<b>Pumping Phase</b>				
815	0	5.16	0	Start MW-6 pumping test.
839	24	5.15	+0.01	
939	84	5.12	+0.04	
1015	120	5.13	+0.03	
1045	150	5.13	+0.03	
1127	192	5.09	+0.07	
1210	235	5.09	+0.07	
1300	285	5.04	+0.12	
1335	320	5.02	+0.14	
1400	345	5.02	+0.14	
1415	360	5.02	+0.14	End MW-6 pumping phase. Begin 6-hour recovery phase.
<b>Recovery Phase</b>				
1535	440	5.03	+0.13	
1617	482	5.03	+0.13	
1658	523	5.06	+0.1	
1738	563	5.06	+0.1	
1830	615	5.08	+0.08	
1858	643	5.10	+0.06	
1930	675	5.11	+0.05	
2000	705	5.17	-0.01	
2015	720	5.17	-0.01	End of test.

LEGEND

gpm Gallons per minute

Q Groundwater flow rate

a As detailed in the approved RFI Work Plan, monitor well MW-6 is located within 25 feet of the Corpus Christi Ship Channel. Water levels in the MW-6 well bore are therefore subject to tidal influences. Observation well MW-4, completed in the same shallow water-bearing unit as monitor well MW-6, was used as an observation well to determine tidal influences during the MW-6 aquifer test. Monitor well MW-4 is located over 1,000 feet from monitor well MW-6 and is beyond the radius of influence created in the uppermost water-bearing unit by pumping of monitor well MW-6.



**MW-6 AQUIFER TEST - DRAWDOWN - ENCYCLE RFI**

Data Set: G:\Active Projects\Encycle\642.0001\Pumping Tests\MW-6 DD.aqt  
 Date: 05/16/02 Time: 10:06:30

**PROJECT INFORMATION**

Company: ARCADIS G & M  
 Client: Encycle  
 Project: CC000642.0001  
 Test Location: Corpus Christi, TX  
 Test Well: MW-6  
 Test Date: 7-26-00

**AQUIFER DATA**

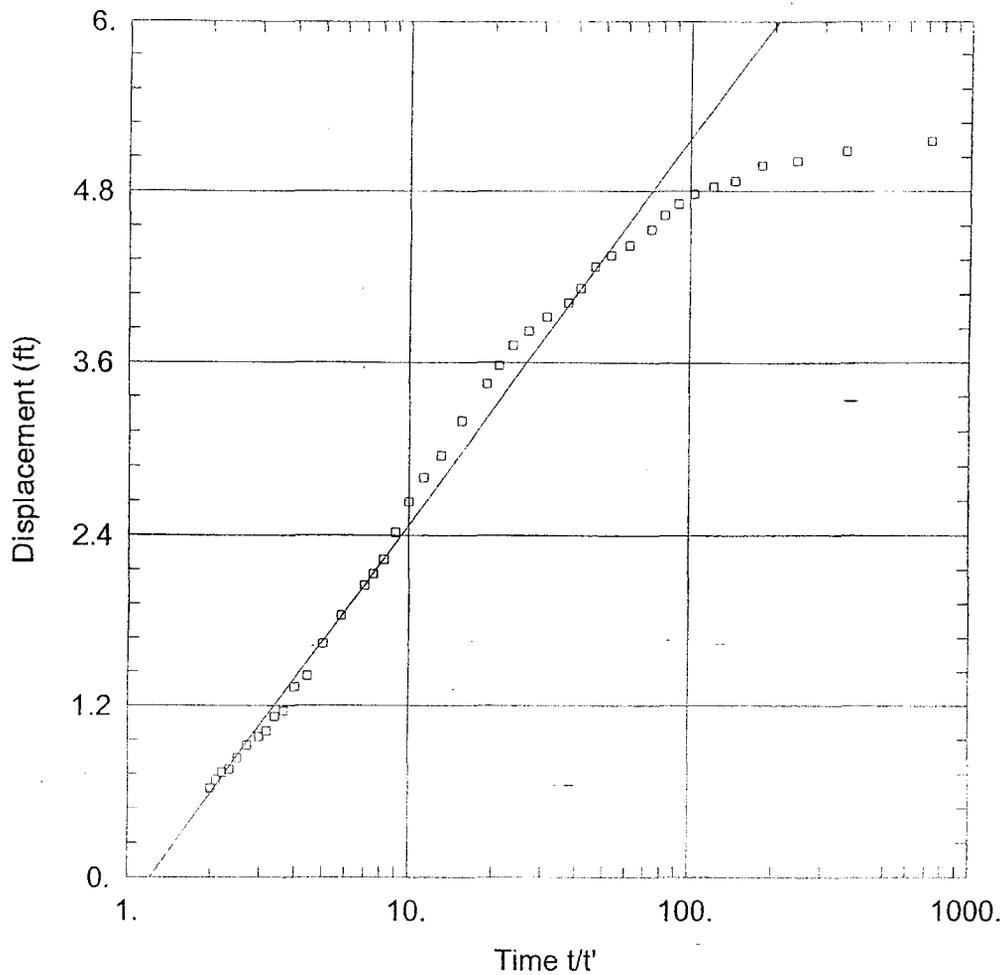
Saturated Thickness: 7. ft Anisotropy Ratio (Kz/Kr): 0.5

**WELL DATA**

Pumping Wells			Observation Wells		
Well Name	X (ft)	Y (ft)	Well Name	X (ft)	Y (ft)
MW-6	0	0	□ MW-6	0	0.46

**SOLUTION**

Aquifer Model: Unconfined Solution Method: Cooper-Jacob  
 T = 45.7 gal/day/ft



**MW-6 PUMPING TEST - RECOVERY - ENCYCLE RFI**

Data Set: G:\Active Projects\Encycle\642.0001\Pumping Tests\MW-6 REC.aqt  
 Date: 05/16/02 Time: 10:04:07

**PROJECT INFORMATION**

Company: ARCADIS G & M  
 Client: Encycle  
 Project: CC000642.0001  
 Test Location: Corpus Christi, TX  
 Test Well: MW-6  
 Test Date: 7-26-00

**AQUIFER DATA**

Saturated Thickness: 7. ft Anisotropy Ratio (Kz/Kr): 0.5

**WELL DATA**

Pumping Wells			Observation Wells		
Well Name	X (ft)	Y (ft)	Well Name	X (ft)	Y (ft)
MW-6	0	0	MW-6	0	0.46

**SOLUTION**

Solution Method: Theis (Recovery)

T = 24.53 gal/day/ft

APPENDIX H

ARCADIS

**Appendix H**

Laboratory Reports – Soil

**ASARCO**

RECEIVED

JUL 23 2000

ARCADIS Geraghty & Miller

July 21, 2000

Mr. Ken Brandner  
ARCADIS Geraghty & Miller, Inc.

Dear Sir:

Please find attached the analytical results and associated quality control data for ten soil boring samples collected in association with the Encycle/Texas RFI investigation. Samples were collected on June 12, 2000 and received by the lab on June 13, 2000.

Sincerely,



Vince Keller  
Laboratory Coordinator

CC:GRStanga (w/attach.)  
RCMarcus (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000896

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD DAYS	METHOD
							ANALYZED	ANALYZED		
L000896-001	12-JUN-00	B99 (0-0.5')	AG	321	ppm	VPK	26-JUL-00	26-JUL-00	6010	6010
			AS	8018	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			BA	1181	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			BI	82	ppm	VPK	15-JUL-00	15-JUL-00	6010	6010
			CD	2970	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			CN	7.0	ppm	RDC	14-JUN-00	14-JUN-00	335.2	335.2
			CO	1209	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			CR	930	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			CU	104400	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			HG	16	ppm	VPK	22-JUN-00	22-JUN-00	7471	7471
			MN	11910	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			NI	1369	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			PB	25130	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			SB	139	ppm	VPK	15-JUL-00	15-JUL-00	6010	6010
			SE	83	ppm	VPK	15-JUL-00	15-JUL-00	6010	6010
			SN	472	ppm	VPK	20-JUL-00	20-JUL-00	6010	6010
			TL	<20*	ppm	VPK	15-JUL-00	15-JUL-00	6010	6010
			V	20	ppm	VPK	15-JUL-00	15-JUL-00	6010	6010
			ZN	145500	ppm	VPK	21-JUN-00	21-JUN-00	6010	6010
			L000896-002	12-JUN-00	B98 (0-0.5')	AG	352	ppm	VPK	26-JUL-00
AS	1542	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
BA	1536	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
BI	90	ppm				VPK	15-JUL-00	15-JUL-00	6010	6010
CD	2046	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
CN	.83	ppm				RDC	14-JUN-00	14-JUN-00	335.2	335.2
CO	517	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
CR	717	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
CU	12230	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
HG	2.2	ppm				VPK	22-JUN-00	22-JUN-00	7471	7471
MN	9205	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
NI	963	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
PB	20870	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010
SB	79	ppm				VPK	15-JUL-00	15-JUL-00	6010	6010
SE	31	ppm				VPK	15-JUL-00	15-JUL-00	6010	6010
SN	271	ppm				VPK	20-JUL-00	20-JUL-00	6010	6010
TL	<20*	ppm				VPK	15-JUL-00	15-JUL-00	6010	6010
V	24	ppm				VPK	15-JUL-00	15-JUL-00	6010	6010
ZN	87900	ppm				VPK	21-JUN-00	21-JUN-00	6010	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000896

LAB NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD DAYS	METHOD
							ANALYZED	ANALYZED		
L000896-003	12-JUN-00	B97 (0-0.5')	AG	320	ppm	VPK	26-JUL-00		6010	6010
			AS	3197	ppm	VPK	21-JUN-00		6010	6010
			BA	759	ppm	VPK	21-JUN-00		6010	6010
			BI	129	ppm	VPK	15-JUL-00		6010	6010
			CD	3051	ppm	VPK	21-JUN-00		6010	6010
			CN-	21.	ppm	RDC	14-JUN-00		335.2	6010
			CO	5568	ppm	VPK	21-JUN-00		6010	6010
			CR	2471	ppm	VPK	21-JUN-00		6010	6010
			CU	22470	ppm	VPK	21-JUN-00		6010	6010
			HG	11	ppm	VPK	22-JUN-00		7471	6010
			MN	17930	ppm	VPK	21-JUN-00		6010	6010
			NI	3562	ppm	VPK	21-JUN-00		6010	6010
			PB	65760	ppm	VPK	21-JUN-00		6010	6010
			SB	336	ppm	VPK	15-JUL-00		6010	6010
			SE	21	ppm	VPK	15-JUL-00		6010	6010
			SN	1342	ppm	VPK	20-JUL-00		6010	6010
			TL	<20*	ppm	VPK	15-JUL-00		6010	6010
			V	28	ppm	VPK	15-JUL-00		6010	6010
			ZN	149300	ppm	VPK	21-JUN-00		6010	6010
			L000896-004	12-JUN-00	B96 (0-0.5')	AG	345	ppm	VPK	26-JUL-00
AS	3353	ppm				VPK	21-JUN-00		6010	6010
BA	1665	ppm				VPK	21-JUN-00		6010	6010
BI	92	ppm				VPK	15-JUL-00		6010	6010
CD	2795	ppm				VPK	21-JUN-00		6010	6010
CN-	1.6	ppm				RDC	14-JUN-00		335.2	6010
CO	363	ppm				VPK	21-JUN-00		6010	6010
CR	351	ppm				VPK	21-JUN-00		6010	6010
CU	30530	ppm				VPK	21-JUN-00		6010	6010
HG	11	ppm				VPK	22-JUN-00		7471	6010
MN	8209	ppm				VPK	21-JUN-00		6010	6010
NI	457	ppm				VPK	21-JUN-00		6010	6010
PB	28300	ppm				VPK	21-JUN-00		6010	6010
SB	128	ppm				VPK	15-JUL-00		6010	6010
SE	39	ppm				VPK	15-JUL-00		6010	6010
SN	332	ppm				VPK	20-JUL-00		6010	6010
TL	<20*	ppm				VPK	15-JUL-00		6010	6010
V	21	ppm				VPK	15-JUL-00		6010	6010
ZN	117600	ppm				VPK	21-JUN-00		6010	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000896

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000896-005	12-JUN-00	B103 (0-0.5')	AG	11	ppm	VPK	20-JUL-00		6010
			AS	46	ppm	VPK	15-JUL-00		6010
			BA	311	ppm	VPK	15-JUL-00		6010
			BI	<4.0	ppm	VPK	15-JUL-00		6010
			CD	157	ppm	VPK	15-JUL-00		6010
			CN-	<.04	ppm	RDC	14-JUN-00		335.2
			CO	12	ppm	VPK	15-JUL-00		6010
			CR	19	ppm	VPK	15-JUL-00		6010
			CU	415	ppm	VPK	15-JUL-00		6010
			HG	1.5	ppm	VPK	22-JUN-00		7471
			MN	404	ppm	VPK	15-JUL-00		6010
			NI	18	ppm	VPK	15-JUL-00		6010
			PB	680	ppm	VPK	15-JUL-00		6010
			SB	2.1	ppm	VPK	15-JUL-00		6010
			SE	1.7	ppm	VPK	15-JUL-00		6010
			SN	13	ppm	VPK	20-JUL-00		6010
			TL	<20*	ppm	VPK	15-JUL-00		6010
			V	27	ppm	VPK	15-JUL-00		6010
			ZN	16600	ppm	VPK	21-JUN-00		6010
			L000896-006	12-JUN-00	B102 (0-0.5')	AG	4.4	ppm	VPK
AS	24	ppm				VPK	15-JUL-00		6010
BA	237	ppm				VPK	15-JUL-00		6010
BI	<4.0	ppm				VPK	15-JUL-00		6010
CD	236	ppm				VPK	15-JUL-00		6010
CN-	<.04	ppm				RDC	14-JUN-00		335.2
CO	11	ppm				VPK	15-JUL-00		6010
CR	13	ppm				VPK	15-JUL-00		6010
CU	187	ppm				VPK	15-JUL-00		6010
HG	.46	ppm				VPK	22-JUN-00		7471
MN	349	ppm				VPK	15-JUL-00		6010
NI	19	ppm				VPK	15-JUL-00		6010
PB	338	ppm				VPK	15-JUL-00		6010
SB	2.1	ppm				VPK	15-JUL-00		6010
SE	.96	ppm				VPK	15-JUL-00		6010
SN	6.6	ppm				VPK	20-JUL-00		6010
TL	<20*	ppm				VPK	15-JUL-00		6010
V	20	ppm				VPK	15-JUL-00		6010
ZN	16260	ppm				VPK	21-JUN-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000896

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000896-007	12-JUN-00	B101 (0-0.5')	AG	120	ppm	VPK	20-JUL-00		6010
			AS	359	ppm	VPK	21-JUN-00		6010
			BA	448	ppm	VPK	21-JUN-00		6010
			BI	12	ppm	VPK	15-JUL-00		6010
			CD	334	ppm	VPK	21-JUN-00		6010
			CN-	<.04	ppm	RDC	14-JUN-00		335.2
			CO	12	ppm	VPK	15-JUL-00		6010
			CR	23	ppm	VPK	15-JUL-00		6010
			CU	2334	ppm	VPK	21-JUN-00		6010
			HG	11	ppm	VPK	22-JUN-00		7471
			MN	1083	ppm	VPK	21-JUN-00		6010
			NI	22	ppm	VPK	15-JUL-00		6010
			PB	5451	ppm	VPK	21-JUN-00		6010
			SB	21	ppm	VPK	15-JUL-00		6010
			SE	20	ppm	VPK	15-JUL-00		6010
			SN	36	ppm	VPK	20-JUL-00		6010
			TL	<20*	ppm	VPK	15-JUL-00		6010
			V	13	ppm	VPK	15-JUL-00		6010
			ZN	66230	ppm	VPK	14-JUL-00		6010
			L000896-008	12-JUN-00	DUPLICATE-1	AG	287	ppm	VPK
AS	1794	ppm				VPK	21-JUN-00		6010
BA	1065	ppm				VPK	21-JUN-00		6010
BI	142	ppm				VPK	15-JUL-00		6010
CD	3911	ppm				VPK	21-JUN-00		6010
CN-	14	ppm				RDC	14-JUN-00		335.2
CO	14450	ppm				VPK	21-JUN-00		6010
CR	4691	ppm				VPK	21-JUN-00		6010
CU	44110	ppm				VPK	21-JUN-00		6010
HG	6.5	ppm				VPK	22-JUN-00		7471
MN	22500	ppm				VPK	21-JUN-00		6010
NI	18280	ppm				VPK	21-JUN-00		6010
PB	40450	ppm				VPK	21-JUN-00		6010
SB	163	ppm				VPK	15-JUL-00		6010
SE	28	ppm				VPK	15-JUL-00		6010
SN	2073	ppm				VPK	20-JUL-00		6010
TL	<20*	ppm				VPK	15-JUL-00		6010
V	88	ppm				VPK	15-JUL-00		6010
ZN	111400	ppm				VPK	14-JUL-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000896

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000896-009	12-JUN-00	DUPLICATE-2	AG	4.7	ppm	VPK	20-JUL-00		6010
			AS	23	ppm	VPK	15-JUL-00		6010
			BA	273	ppm	VPK	21-JUN-00		6010
			BI	<4.0	ppm	VPK	15-JUL-00		6010
			CD	81	ppm	VPK	15-JUL-00		6010
			CN-	<.04	ppm	RDC	14-JUN-00		335.2
			CO	117	ppm	VPK	15-JUL-00		6010
			CR	43	ppm	VPK	15-JUL-00		6010
			CU	414	ppm	VPK	15-JUL-00		6010
			HG	23	ppm	VPK	22-JUN-00		7471
			MN	433	ppm	VPK	21-JUN-00		6010
			NI	136	ppm	VPK	15-JUL-00		6010
			PB	467	ppm	VPK	21-JUN-00		6010
			SB	1.7	ppm	VPK	15-JUL-00		6010
			SE	<.80	ppm	VPK	15-JUL-00		6010
			SN	27	ppm	VPK	20-JUL-00		6010
			TL	<20*	ppm	VPK	15-JUL-00		6010
			V	24	ppm	VPK	15-JUL-00		6010
			ZN	3045	ppm	VPK	14-JUL-00		6010
			L000896-010	12-JUN-00	DUPLICATE-3	AG	81	ppm	VPK
AS	298	ppm				VPK	21-JUN-00		6010
BA	348	ppm				VPK	21-JUN-00		6010
BI	12	ppm				VPK	15-JUL-00		6010
CD	436	ppm				VPK	21-JUN-00		6010
CN-	.31	ppm				RDC	14-JUN-00		335.2
CO	52	ppm				VPK	15-JUL-00		6010
CR	28	ppm				VPK	15-JUL-00		6010
CU	2554	ppm				VPK	21-JUN-00		6010
HG	22	ppm				VPK	22-JUN-00		7471
MN	1132	ppm				VPK	21-JUN-00		6010
NI	71	ppm				VPK	15-JUL-00		6010
PB	4048	ppm				VPK	21-JUN-00		6010
SB	20	ppm				VPK	15-JUL-00		6010
SE	14	ppm				VPK	15-JUL-00		6010
SN	51	ppm				VPK	20-JUL-00		6010
TL	<20*	ppm				VPK	15-JUL-00		6010
V	16	ppm				VPK	15-JUL-00		6010
ZN	62730	ppm				VPK	14-JUL-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L000896

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
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digestion--3050  
\* Tl results have elevated limit of detection due to matrix interference.

Approved:   
Reviewed: 

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000475

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000475-1		Matrix Spike	AG	102	%Recovery	VPK	20-JUL-00	6010				
			AS	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			BA	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			BI	95	%Recovery	VPK	15-JUL-00	6010				
			CD	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			CN-	SR>4XSA	%Recovery	RDC	14-JUN-00	335.2				
			CO	SR>4XSA	%Recovery	VPK	15-JUL-00	6010				
			CR	100	%Recovery	VPK	15-JUL-00	6010				
			CU	SR>4XSA	%Recovery	VPK	15-JUL-00	6010				
			HG	SR>4XSA	%Recovery	VPK	22-JUN-00	7471				
			MN	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			NI	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			PB	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			SE	83	%Recovery	VPK	15-JUL-00	6010				
			SN	90	%Recovery	VPK	20-JUL-00	6010				
			TL	88	%Recovery	VPK	15-JUL-00	6010				
			V	99	%Recovery	VPK	15-JUL-00	6010				
			ZN	SR>4XSA	%Recovery	VPK	21-JUN-00	6010				
			WG000475-2		Prep Blank	AG	<.50	ppm	VPK	20-JUL-00	6010	
						AS	<5.0	ppm	VPK	15-JUL-00	6010	
BA	<5.0	ppm				VPK	15-JUL-00	6010				
BI	<4.0	ppm				VPK	15-JUL-00	6010				
CD	<1.0	ppm				VPK	15-JUL-00	6010				
CN-	<.04	ppm				RDC	14-JUN-00	335.2				
CO	<5.0	ppm				VPK	15-JUL-00	6010				
CR	<5.0	ppm				VPK	15-JUL-00	6010				
HG	<.05	ppm				VPK	22-JUN-00	7471				
MN	<5.0	ppm				VPK	15-JUL-00	6010				
NI	<5.0	ppm				VPK	15-JUL-00	6010				
PB	<5.0	ppm				VPK	15-JUL-00	6010				
SE	<.80	ppm				VPK	15-JUL-00	6010				
SN	<5.0	ppm				VPK	20-JUL-00	6010				
TL	<1.0	ppm				VPK	15-JUL-00	6010				
V	<5.0	ppm				VPK	15-JUL-00	6010				
ZN	<5.0	ppm				VPK	15-JUL-00	6010				
WG000475-3		Lab Control Sample				AG	106	%Recovery	VPK	20-JUL-00	6010	
						AS	111	%Recovery	VPK	19-JUN-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000475

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000475-3		Lab Control Sample	BA	112	%Recovery	VPK	19-JUN-00	6010				
			BI	118	%Recovery	VPK	19-JUN-00	6010				
			CD	108	%Recovery	VPK	19-JUN-00	6010				
			CN-	94	%Recovery	RDC	14-JUN-00	335.2				
			CO	102	%Recovery	VPK	19-JUN-00	6010				
			CR	96	%Recovery	VPK	19-JUN-00	6010				
			CU	110	%Recovery	VPK	19-JUN-00	6010				
			HG	90	%Recovery	VPK	22-JUN-00	7471				
			MN	101	%Recovery	VPK	19-JUN-00	6010				
			NI	105	%Recovery	VPK	19-JUN-00	6010				
			PB	101	%Recovery	VPK	19-JUN-00	6010				
			SB	85	%Recovery	VPK	15-JUL-00	6010				
			SE	89	%Recovery	VPK	19-JUN-00	6010				
			SN	112	%Recovery	VPK	20-JUL-00	6010				
			TL	103	%Recovery	VPK	19-JUN-00	6010				
			V	101	%Recovery	VPK	19-JUN-00	6010				
			ZN	98	%Recovery	VPK	19-JUN-00	6010				
			WG000475-4		Matrix Spike Duplicate	AG	<1	% RPD	VPK	20-JUL-00	6010	
						AS	<1	% RPD	VPK	21-JUN-00	6010	
						BA	<1	% RPD	VPK	21-JUN-00	6010	
BI	3	% RPD				VPK	15-JUL-00	6010				
CD	<1	% RPD				VPK	21-JUN-00	6010				
CN-	14	% RPD				RDC	14-JUN-00	335.2				
CO	<1	% RPD				VPK	15-JUL-00	6010				
CR	<1	% RPD				VPK	15-JUL-00	6010				
CU	2	% RPD				VPK	15-JUL-00	6010				
HG	<1	% RPD				VPK	22-JUN-00	7471				
MN	<1	% RPD				VPK	21-JUN-00	6010				
NI	3	% RPD				VPK	21-JUN-00	6010				
PB	3	% RPD				VPK	21-JUN-00	6010				
SB	6	% RPD				VPK	15-JUL-00	6010				
SE	<1	% RPD				VPK	15-JUL-00	6010				
SN	2	% RPD				VPK	20-JUL-00	6010				
TL	<1	% RPD				VPK	15-JUL-00	6010				
V	<1	% RPD				VPK	15-JUL-00	6010				
ZN	<1	% RPD				VPK	21-JUN-00	6010				

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000475

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000475-5		Reporting Limit	AG	.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CO	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SE	.80	ppm				6010
			SN	5.0	ppm				6010
			TL	20*	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010



Approved



Reviewed



GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

**CHAIN-OF-CUSTODY RECORD**

Page 1 of 4

Project Number/Name 0000 642 . 0001

Project Location Exempla, Coopers Creek, TX

Laboratory Asarco, Salt Lake City, Utah

Project Manager KEN BRANDENBER

Sampler(s)/Affiliation Beate Hagen / ARCADIS  
Georgy Miller

ANALYSIS / METHOD / SIZE

(16 oz wide-mouth glass jar w/ lined lid)

Vandium (V) 20  
Thallium (Tl) 20  
Mn, Hg, Ni, Se, Silver (Ag)  
Cyanide (CN) 20  
Total Arsenic (As) 20  
Total Chromium (Cr) 20  
Total Lead (Pb) 20  
Total Mercury (Hg) 20  
Total Manganese (Mn) 20  
Total Nickel (Ni) 20  
Total Selenium (Se) 20  
Total Silver (Ag) 20  
Total Vanadium (V) 20  
Total Zinc (Zn) 20

Sample ID/Location	Matrix	Date/Time	Sampled	Lab ID	Remarks	Total
B9A (0-0.5')	S	6-12-00	09:40			1
B9A (2-2.5')			09:50		(hold)	1
B9A (5.5')			10:00		(hold)	1
B9A (8.5')			10:05		(hold)	1
B9A (11.5')			10:07		(hold)	1
B9A (14-14.5')			10:15		(hold)	1
B9B (0-0.5')			10:30		(hold)	1
B9B (2-2.5')			10:37		(hold)	1
B9B (5.5')			10:40		(hold)	1
B9B (8.5')			10:46		(hold)	1
B9B (11.5')			10:50		(hold)	1
B9B (14-14.5')			10:55		(hold)	1

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: ARCADIS Organization: ARCADIS Date: 6/12/00 Time: 10:00 Seal Intact? (Yes)

Received by: ASARCO Organization: ASARCO Date: 6/13/00 Time: 10:00 Seal Intact? (Yes)

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: (see Table G-1 in RFI Work Plan Quality Assurance Plan for test methods - attached)

Analyze 0-0.5' depth soil samples for all parameters, hold deeper samples until notified by ARCADIS Georgy & Miller. Results to: Ken Branden, ARCADIS Geology, 541700 Coopers Creek, TX

Delivery Method:  In Person  Common Carrier  Lab Courier  Other







ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page \_\_\_\_\_ of \_\_\_\_\_

4 A

Project Number/Name CC0000021.D001  
 Project Location ENICELLE, Campus Unvrsity, TX  
 Laboratory ASTRUCO, Southlake City, UTMA  
 Project Manager Ken Bannister  
 Sampler(s)/Affiliation BH PILLONIS

ANALYSIS / METHOD / SIZE

THML - Sp. B. B. B. B. B.  
 (4) Cr. Co. Co. Co. Co. Co. Co. Co.  
 SN, W. 2N  
 (1) 200 glass jar  
 (1) 1 liter jar

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B-101	S	11/21/00 11:05			1
B-101	S	11/07		(HOLD)	1
B-101	S	11/07		(HOLD)	1
B-101	S	11/22		(HOLD)	1
B-101	S	11/25		(HOLD)	1
B-101	S	11/25		(HOLD)	1
Duplicate - 1	S	-			1
Duplicate - 2	S	-			1
Duplicate - 3	S	-			1
Equipment - 1	L	11/20			1
Equipment - 2	L	11/20			1
Equipment - 3	L	11/25			1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Total No. of Bottles/Containers 12

Relinquished by: [Signature] Organization: ARCADIS Date: 6/12/00 Time: 1:00 Seal Intact? (Yes)  
 Received by: [Signature] Organization: ASTRUCO Date: 6/13/00 Time: 11:00 Seal Intact? (Yes)

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: \_\_\_\_\_

Delivery Method:  In Person  Common Carrier FEDEX  Lab Courier  Other \_\_\_\_\_  
 SPECIFY SPECIFY SPECIFY

ASARCO

8/30/2000

8/30/2000

Miller

August 30, 2000

Mr. Ken Brandner  
ARCADIS Geraghty & Miller, Inc.

Dear Sir:

Please find attached the analytical results and associated quality control data for twenty two soil boring samples collected in association with the Encycle/Texas RFI investigation. Samples were collected on June 12, 2000 and received by the lab on June 13, 2000.

Sincerely,



Duane Coble  
Laboratory Tech.

CC:GRStanga (w/attach.)  
RCMarcus (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000915

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD			
L000915-001	12-JUN-00	B99 (2-2.5')	AG	*1.8	ppm	MK	31-JUL-00	6010			
			AS	15.	ppm	MK	31-JUL-00	6010			
			BA	370.	ppm	MK	31-JUL-00	6010			
			BI	<4	ppm	MK	31-JUL-00	6010			
			CD	27.	ppm	MK	31-JUL-00	6010			
			CN-	<.04	ppm	DC	20-JUN-00	335.2			
			CO	41.	ppm	MK	31-JUL-00	6010			
			CR	19.	ppm	MK	31-JUL-00	6010			
			CU	*165.	ppm	MK	31-JUL-00	6010			
			HG	.08	ppm	EH	29-JUN-00	245.1			
			MN	311.	ppm	MK	31-JUL-00	6010			
			MOIST.	16.	%	MF	28-JUL-00	GRAY.			
			NI	18.	ppm	MK	31-JUL-00	6010			
			PB	45.	ppm	MK	31-JUL-00	6010			
			SB	*1.5	ppm	MK	31-JUL-00	6010			
			SE	*<5.	ppm	MK	31-JUL-00	6010			
			SN	<5	ppm	MK	31-JUL-00	6010			
			TL	1.1	ppm	MK	31-JUL-00	6010			
			ZN	2900.	ppm	MK	31-JUL-00	6010			
			L000915-002	12-JUN-00	B99 (5.5')	AG	*2.2	ppm	MK	31-JUL-00	6010
AS	25.	ppm				MK	31-JUL-00	6010			
CD	85.	ppm				MK	31-JUL-00	6010			
CO	37.	ppm				MK	31-JUL-00	6010			
CR	20.	ppm				MK	31-JUL-00	6010			
CU	*274.	ppm				MK	31-JUL-00	6010			
SB	*1.1	ppm				MK	31-JUL-00	6010			
TL	1.9	ppm				MK	31-JUL-00	6010			
ZN	2045.	ppm				MK	31-JUL-00	6010			
L000915-003	12-JUN-00	B99 (8.5')				AG	*.96	ppm	MK	31-JUL-00	6010
						AS	7.9	ppm	MK	31-JUL-00	6010
						CD	1.9	ppm	MK	31-JUL-00	6010
			CO	10.	ppm	MK	31-JUL-00	6010			
			CR	24.	ppm	MK	31-JUL-00	6010			
			CU	*18.	ppm	MK	31-JUL-00	6010			
			SB	*1.6	ppm	MK	31-JUL-00	6010			
			TL	2.0	ppm	MK	31-JUL-00	6010			
			ZN	130.	ppm	MK	31-JUL-00	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000915

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000915-004	12-JUN-00	B99 (11.5')	AG	*1.6	ppm	MK	31-JUL-00	6010
			CO	13.	ppm	MK	31-JUL-00	6010
			CR	32.	ppm	MK	31-JUL-00	6010
			CU	*124.	ppm	MK	31-JUL-00	6010
			SB	*1.6	ppm	MK	31-JUL-00	6010
			TL	2.3	ppm	MK	31-JUL-00	6010
			ZN	281.	ppm	MK	31-JUL-00	6010
L000915-005	12-JUN-00	B99 (14-14.5')	AG	*1.9	ppm	MK	31-JUL-00	6010
			CO	5.2	ppm	MK	31-JUL-00	6010
			CR	13.	ppm	MK	31-JUL-00	6010
			CU	*16.	ppm	MK	31-JUL-00	6010
			SB	*1.5	ppm	MK	31-JUL-00	6010
			TL	1.5	ppm	MK	31-JUL-00	6010
			ZN	51.	ppm	MK	31-JUL-00	6010
			AG	*2.9	ppm	MK	31-JUL-00	6010
			AS	5.3	ppm	MK	31-JUL-00	6010
			BA	416.	ppm	MK	31-JUL-00	6010
L000915-006	12-JUN-00	B98 (2-2.5')	BI	<4	ppm	MK	31-JUL-00	6010
			CD	1.1	ppm	MK	31-JUL-00	6010
			CN-	<.04	ppm	DC	20-JUN-00	335.2
			CO	6.6	ppm	MK	31-JUL-00	6010
			CR	19.	ppm	MK	31-JUL-00	6010
			CU	*11.	ppm	MK	31-JUL-00	6010
			HG	<.05	ppm	EH	29-JUN-00	245.1
			MN	327.	ppm	MK	31-JUL-00	6010
			MOIST.	15.9	%	MF	28-JUL-00	GRAV.
			NI	13.	ppm	MK	31-JUL-00	6010
			PB	14.	ppm	MK	31-JUL-00	6010
			SB	*<.8	ppm	MK	31-JUL-00	6010
			SE	*<5.	ppm	MK	31-JUL-00	6010
SN	<5	ppm	MK	31-JUL-00	6010			
TL	2.6	ppm	MK	31-JUL-00	6010			
ZN	82.	ppm	MK	31-JUL-00	6010			
L000915-007	12-JUN-00	B98 (5.5')	AG	*21.	ppm	MK	31-JUL-00	6010
			CR	24.	ppm	MK	31-JUL-00	6010
			SE	*<5.	ppm	MK	31-JUL-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000915

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000915-007	12-JUN-00	B98 (5.5')	TL	1.6	ppm	MK	31-JUL-00	6010
			ZN	76.	ppm	MK	31-JUL-00	6010
L000915-008	12-JUN-00	B98 (8.5')	AG	*2.4	ppm	MK	31-JUL-00	6010
			CR	25.	ppm	MK	31-JUL-00	6010
			SE	*<5.	ppm	MK	31-JUL-00	6010
			TL	2.0	ppm	MK	31-JUL-00	6010
			ZN	93.	ppm	MK	31-JUL-00	6010
L000915-009	12-JUN-00	B98 (11.5')	AG	*1.9	ppm	MK	31-JUL-00	6010
			CR	15.	ppm	MK	31-JUL-00	6010
			SE	*<5.	ppm	MK	31-JUL-00	6010
			TL	<1	ppm	MK	31-JUL-00	6010
			ZN	49.	ppm	MK	31-JUL-00	6010
L000915-010	12-JUN-00	B98 (14-14.5')	AG	*9.0	ppm	MK	31-JUL-00	6010
			CR	16.	ppm	MK	31-JUL-00	6010
			SE	*<5.	ppm	MK	31-JUL-00	6010
			ZN	52.	ppm	MK	31-JUL-00	6010
L000915-011	12-JUN-00	B97 (2-2.5')	AG	*9.1	ppm	MK	31-JUL-00	6010
			AS	8.1	ppm	MK	31-JUL-00	6010
			BA	432.	ppm	MK	31-JUL-00	6010
			BI	<4	ppm	MK	31-JUL-00	6010
			CD	2165.	ppm	MK	31-JUL-00	6010
			CN-	<.04	ppm	DC	20-JUN-00	335.2
			CO	204.	ppm	MK	31-JUL-00	6010
			CR	26.	ppm	MK	31-JUL-00	6010
			CU	*56.	ppm	MK	31-JUL-00	6010
			HG	<.05	ppm	EH	29-JUN-00	245.1
			MN	1656	ppm	MK	31-JUL-00	6010
			MOIST.	18.2	%	MF	28-JUL-00	GRAV.
			NI	56.	ppm	MK	31-JUL-00	6010
			PB	90.	ppm	MK	31-JUL-00	6010
			SB	*2.5	ppm	MK	31-JUL-00	6010
			SE	*<5.	ppm	MK	31-JUL-00	6010
			SN	<5	ppm	MK	31-JUL-00	6010
TL	<1	ppm	MK	31-JUL-00	6010			
V	45.	ppm	MK	31-JUL-00	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L000915

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000915-011	12-JUN-00	B97 (2-2.5')	ZN	20000.	ppm	MK	31-JUL-00	6010
			AG	*1.9	ppm	MK	31-JUL-00	6010
			AS	<5	ppm	MK	31-JUL-00	6010
			CD	976.	ppm	MK	31-JUL-00	6010
			CO	59.	ppm	MK	31-JUL-00	6010
			CR	17.	ppm	MK	31-JUL-00	6010
			CU	*35.	ppm	MK	31-JUL-00	6010
			MN	450.	ppm	MK	31-JUL-00	6010
			NI	31.	ppm	MK	31-JUL-00	6010
			PB	37.	ppm	MK	31-JUL-00	6010
			SB	*1.1	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			V	33.	ppm	MK	31-JUL-00	6010
			ZN	6285.	ppm	MK	31-JUL-00	6010
L000915-013	12-JUN-00	B97 (8.5')	AG	*13.	ppm	MK	31-JUL-00	6010
			CD	13.	ppm	MK	31-JUL-00	6010
			CO	12.	ppm	MK	31-JUL-00	6010
			CR	13.	ppm	MK	31-JUL-00	6010
			CU	*14.	ppm	MK	31-JUL-00	6010
			NI	10.	ppm	MK	31-JUL-00	6010
			SB	*2.5	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			ZN	175.	ppm	MK	31-JUL-00	6010
L000915-014	12-JUN-00	B97 (11.5')	AG	*11.	ppm	MK	31-JUL-00	6010
			CD	7.2	ppm	MK	31-JUL-00	6010
			CO	6.3	ppm	MK	31-JUL-00	6010
			SB	*9.0	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			ZN	108.	ppm	MK	31-JUL-00	6010
L000915-015	12-JUN-00	B97 (14.5')	AG	*21.	ppm	MK	31-JUL-00	6010
			CD	11.	ppm	MK	31-JUL-00	6010
			SB	*4.8	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			ZN	92.	ppm	MK	31-JUL-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

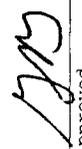
Technical Services (Project 8201)

Batch No: L000915

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000915-020	12-JUN-00	B96 (11.5')	AG	*2.2	ppm	MK	31-JUL-00	6010
			CR	56.	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			ZN	24.	ppm	MK	31-JUL-00	6010
L000915-021	12-JUN-00	B96 (14.5')	AG	*42.	ppm	MK	31-JUL-00	6010
			CR	20.	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			ZN	54.	ppm	MK	31-JUL-00	6010
L000915-022	12-JUN-00	B96 (16-16.5)	AG	*1.8	ppm	MK	31-JUL-00	6010
			CR	17.	ppm	MK	31-JUL-00	6010
			SE	*45.	ppm	MK	31-JUL-00	6010
			ZN	55.	ppm	MK	31-JUL-00	6010

DIGESTION -- 3050  
 \*--AG,CU,SB SAMPLE RESULTS POTENTIALLY BIASED, BASED ON  
 THE LABORATORY CONTROL SAMPLE AND SPIKE RECOVERY.  
 \*--SE DETECTION LIMIT IS ELEVATED DUE TO MATRIX.

Unless otherwise noted results are not blank corrected.

  
 Approved  
  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000490

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000490-1		Matrix Spike	AG	*45.	%Recovery	MK	31-JUL-00		6010
	AS		107	%Recovery	MK	31-JUL-00		6010	
	BA		105	%Recovery	MK	31-JUL-00		6010	
	BI		110	%Recovery	MK	31-JUL-00		6010	
	CD		101	%Recovery	MK	31-JUL-00		6010	
	CN-		80	%Recovery	DC	20-JUN-00		335.2	
	CO		103	%Recovery	MK	31-JUL-00		6010	
	CR		111	%Recovery	MK	31-JUL-00		6010	
	CU		*129	%Recovery	MK	31-JUL-00		6010	
	HG		80	%Recovery	EH	29-JUN-00		245.1	
	MN		104	%Recovery	MK	31-JUL-00		6010	
	NI		107	%Recovery	MK	31-JUL-00		6010	
	PB		107	%Recovery	MK	31-JUL-00		6010	
	SB		*27	%Recovery	MK	31-JUL-00		6010	
	SE		93	%Recovery	MK	31-JUL-00		6010	
	SN		104	%Recovery	MK	31-JUL-00		6010	
	TL		97	%Recovery	MK	31-JUL-00		6010	
	V		113	%Recovery	MK	31-JUL-00		6010	
	ZN		105	%Recovery	MK	31-JUL-00		6010	
	WG000490-2			Prep Blank	AG	<.5	ppm	MK	31-JUL-00
AS		<5.	ppm		MK	31-JUL-00		6010	
BA		<5	ppm		MK	31-JUL-00		6010	
BI		<4	ppm		MK	31-JUL-00		6010	
CD		<1	ppm		MK	31-JUL-00		6010	
CN-		<.04	ppm		DC	20-JUN-00		335.2	
CO		<5	ppm		MK	31-JUL-00		6010	
CR		<5	ppm		MK	31-JUL-00		6010	
CU		<5	ppm		MK	31-JUL-00		6010	
HG		<.05	ppm		EH	29-JUN-00		245.1	
MN		<5	ppm		MK	31-JUL-00		6010	
NI		<5	ppm		MK	31-JUL-00		6010	
PB		<.8	ppm		MK	31-JUL-00		6010	
SB		<.8	ppm		MK	31-JUL-00		6010	
SE		<5	ppm		MK	31-JUL-00		6010	
SN		<5	ppm		MK	31-JUL-00		6010	
TL		<1	ppm		MK	31-JUL-00		6010	
V		<5	ppm		MK	31-JUL-00		6010	
ZN		<5	ppm		MK	31-JUL-00		6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000490

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000490-3		Lab Control Sample	AG	102	%Recovery	MK	31-JUL-00	6010	
			AS	107	%Recovery	MK	31-JUL-00	6010	
			BA	103	%Recovery	MK	31-JUL-00	6010	
			BI	103	%Recovery	MK	15-AUG-00	6010	
			CD	102	%Recovery	MK	31-JUL-00	6010	
			CN-	92	%Recovery	DC	20-JUN-00	335.2	
			CO	98	%Recovery	MK	31-JUL-00	6010	
			CR	104	%Recovery	MK	31-JUL-00	6010	
			CU	104	%Recovery	MK	31-JUL-00	6010	
			HG	117	%Recovery	EH	29-JUN-00	245.1	
			MN	108	%Recovery	MK	31-JUL-00	6010	
			NI	106	%Recovery	MK	31-JUL-00	6010	
			PB	105	%Recovery	MK	31-JUL-00	6010	
			SB	85	%Recovery	MK	31-JUL-00	6010	
			SE	88	%Recovery	MK	31-JUL-00	6010	
			SN	104	%Recovery	MK	31-JUL-00	6010	
			TL	107	%Recovery	MK	31-JUL-00	6010	
			V	105	%Recovery	MK	31-JUL-00	6010	
			ZN	102	%Recovery	MK	31-JUL-00	6010	
	WG000490-4		Matrix Spike Duplicate	AG	13.	% RPD	MK	31-JUL-00	6010
			AS	2.1	% RPD	MK	31-JUL-00	6010	
			BA	2.0	% RPD	MK	31-JUL-00	6010	
			BI	3.2	% RPD	MK	31-JUL-00	6010	
			CD	1.2	% RPD	MK	31-JUL-00	6010	
			CO	1.	% RPD	MK	31-JUL-00	6010	
			CR	<1	% RPD	MK	31-JUL-00	6010	
			CU	<1	% RPD	MK	31-JUL-00	6010	
			HG	9.	% RPD	EH	29-JUN-00	245.1	
			MN	<1	% RPD	MK	31-JUL-00	6010	
			NI	<1	% RPD	MK	31-JUL-00	6010	
			PB	<1	% RPD	MK	31-JUL-00	6010	
			SB	2.5	% RPD	MK	31-JUL-00	6010	
			SE	1.8	% RPD	MK	31-JUL-00	6010	
			SN	2.4	% RPD	MK	31-JUL-00	6010	
			TL	<1	% RPD	MK	31-JUL-00	6010	
			V	1.5	% RPD	MK	31-JUL-00	6010	
			ZN	1.3	% RPD	MK	31-JUL-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000490

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000490-5		Reporting Limit	AG	.5	ppm	MK	31-JUL-00		6010
			AS	5.	ppm	MK	31-JUL-00		6010
			BA	5.	ppm	MK	31-JUL-00		6010
			BI	4.	ppm	MK	31-JUL-00		6010
			CD	1.	ppm	MK	31-JUL-00		6010
			CN-	.04	ppm	DC	20-JUN-00		335.2
			CO	5.	ppm	MK	31-JUL-00		6010
			CR	5.	ppm	MK	31-JUL-00		6010
			CU	5.	ppm	MK	31-JUL-00		6010
			HG	.05	ppm	EH	29-JUN-00		245.1
			MN	5.	ppm	MK	31-JUL-00		6010
			NI	5.	ppm	MK	31-JUL-00		6010
			PB	5.	ppm	MK	31-JUL-00		6010
			SB	.8	ppm	MK	31-JUL-00		6010
			SE	.8	ppm	MK	31-JUL-00		6010
			SN	5.	ppm	MK	31-JUL-00		6010
			TL	1.	ppm	MK	31-JUL-00		6010
			V	5.	ppm	MK	31-JUL-00		6010
			ZN	5.	ppm	MK	31-JUL-00		6010
			WG000490-6		Duplicate	CN-	14	% RPD	DC
AG	*53	%Recovery				MK	31-JUL-00		6010
WG000490-7		Matrix Spike	AS	108	%Recovery	MK	31-JUL-00		6010
			BA	89	%Recovery	MK	31-JUL-00		6010
			BI	110	%Recovery	MK	31-JUL-00		6010
			CD	107	%Recovery	MK	31-JUL-00		6010
			CN-	100	%Recovery	DC	20-JUN-00		335.2
			CO	107	%Recovery	MK	31-JUL-00		6010
			CR	*68	%Recovery	MK	31-JUL-00		6010
			CU	*125	%Recovery	MK	31-JUL-00		6010
			MN	116	%Recovery	MK	31-JUL-00		6010
			NI	111	%Recovery	MK	31-JUL-00		6010
			PB	102	%Recovery	MK	31-JUL-00		6010
			SB	*35	%Recovery	MK	31-JUL-00		6010
			SE	93	%Recovery	MK	31-JUL-00		6010
			SN	103	%Recovery	MK	31-JUL-00		6010
TL	101	%Recovery	MK	31-JUL-00		6010			
V	114	%Recovery	MK	31-JUL-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000490

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000490-7		Matrix Spike	ZN	107	%Recovery	MK	31-JUL-00	6010	
WG000490-8		Prep Blank	AG	<.5	ppm	MK	31-JUL-00	6010	
	AS		<5	ppm	MK	31-JUL-00	6010		
	BA		<5	ppm	MK	31-JUL-00	6010		
	BI		<4	ppm	MK	31-JUL-00	6010		
	CD		<1	ppm	MK	31-JUL-00	6010		
	CN-		<.04	ppm	DC	20-JUN-00	335.2		
	CO		<5	ppm	MK	31-JUL-00	6010		
	CR		<5	ppm	MK	31-JUL-00	6010		
	CU		<5	ppm	MK	31-JUL-00	6010		
	HG		<.05	ppm	EH	29-JUN-00	245.1		
	MN		<5	ppm	MK	31-JUL-00	6010		
	NI		<5	ppm	MK	31-JUL-00	6010		
	PB		<5	ppm	MK	31-JUL-00	6010		
	SB		<.8	ppm	MK	31-JUL-00	6010		
	SE		<.8	ppm	MK	31-JUL-00	6010		
	SN		<5	ppm	MK	31-JUL-00	6010		
	TL		<1	ppm	MK	31-JUL-00	6010		
V	<5	ppm	MK	31-JUL-00	6010				
ZN	<5	ppm	MK	31-JUL-00	6010				
WG000490-9		Lab Control Sample	AG	62	%Recovery	MK	31-JUL-00	6010	
	AS		116	%Recovery	MK	31-JUL-00	6010		
	BA		118	%Recovery	MK	31-JUL-00	6010		
	CD		117	%Recovery	MK	31-JUL-00	6010		
	CN-		86	%Recovery	DC	20-JUN-00	335.2		
	CO		111	%Recovery	MK	31-JUL-00	6010		
	CR		118	%Recovery	MK	31-JUL-00	6010		
	CU		126	%Recovery	MK	31-JUL-00	6010		
	MN		117	%Recovery	MK	31-JUL-00	6010		
	NI		116	%Recovery	MK	31-JUL-00	6010		
	PB		120	%Recovery	MK	31-JUL-00	6010		
	SB		93	%Recovery	MK	31-JUL-00	6010		
	SE		94	%Recovery	MK	31-JUL-00	6010		
	SN		114	%Recovery	MK	31-JUL-00	6010		
	TL		122	%Recovery	MK	31-JUL-00	6010		
	V		117	%Recovery	MK	31-JUL-00	6010		
	ZN		110	%Recovery	MK	31-JUL-00	6010		

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000490

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD DAYS	METHOD
							ANALYZED	RECEIVED		
WG000490-10		Matrix Spike Duplicate	AG	*55	% RPD	MK	31-JUL-00		6010	
			AS	1.3	% RPD	MK	31-JUL-00		6010	
			BA	7.7	% RPD	MK	31-JUL-00		6010	
			BI	2.7	% RPD	MK	31-JUL-00		6010	
			CD	<1	% RPD	MK	31-JUL-00		6010	
			CO	<1	% RPD	MK	31-JUL-00		6010	
			CR	<1	% RPD	MK	31-JUL-00		6010	
			CU	<1	% RPD	MK	31-JUL-00		6010	
			HG	4.2	% RPD	EH	29-JUN-00		245.1	
			MN	1.3	% RPD	MK	31-JUL-00		6010	
			NI	1.9	% RPD	MK	31-JUL-00		6010	
			PB	2.1	% RPD	MK	31-JUL-00		6010	
			SB	16.	% RPD	MK	31-JUL-00		6010	
			SE	2.1	% RPD	MK	31-JUL-00		6010	
			SN	7.7	% RPD	MK	31-JUL-00		6010	
			TL	1.9	% RPD	MK	31-JUL-00		6010	
			V	2.5	% RPD	MK	31-JUL-00		6010	
			ZN	<1	% RPD	MK	31-JUL-00		6010	
WG000490-12		Duplicate	CN-	<1	% RPD	DC	20-JUN-00		335.2	

\*--AG,CU,SB SAMPLE RESULTS POTENTIALLY BIASED ,  
 BASED ON THE LABORATORY CONTROL SAMPLE AND SPIKE  
 RECOVERY.  
 \*--SE DETECTION LIMIT ELEVATED DUE TO MATRIX.

  
 Approved  
  
 Reviewer

**ASARCO**

**RECEIVED**

**SEP 11 2000**

**ARCADIS Geraghty & Miller**

September 6, 2000

Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results for (66), sixty six soil samples collected on June 13,2000 in association with the Encycle Project # 8201, and received by the laboratory on June 14, 2000.

Please note that Hg and CN- results were reported on as received basis while all other metals were reported on dry weight basis.

If you need further information, please call at (801) 263-5253.

Sincerely,



Adil Harami  
Senior Chemist

Attach.  
cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-001	13-JUN-00	B-104 (2-2.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			AS	<5.	ppm	MDK	24-AUG-00	6010
			BA	114.	ppm	MDK	24-AUG-00	6010
			BI	<4.	ppm	MDK	24-AUG-00	6010
			CD	3.	ppm	MDK	24-AUG-00	6010
			CN-	<0.04	ppm	DC	28-JUN-00	335.2
			CO	<5.	ppm	MDK	24-AUG-00	6010
			CR	11.	ppm	MDK	24-AUG-00	6010
			CU	26.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			MN	260.	ppm	MDK	24-AUG-00	6010
			NI	9.	ppm	MDK	24-AUG-00	6010
			PB	19.	ppm	MDK	24-AUG-00	6010
			SB	<0.8*	ppm	MDK	24-AUG-00	6010
			SE	<0.8*	ppm	MDK	24-AUG-00	6010
			SN	<5.	ppm	MDK	24-AUG-00	6010
			ZN	315.	ppm	MDK	24-AUG-00	6010
L000982-002	13-JUN-00	B-104 (5.5)	CU	12.	ppm	MDK	24-AUG-00	6010
			ZN	60.	ppm	MDK	24-AUG-00	6010
L000982-003	13-JUN-00	B-104 (8.5)	ZN	481.	ppm	MDK	24-AUG-00	6010
L000982-004	13-JUN-00	B-104 (11.5)	ZN	39.	ppm	MDK	24-AUG-00	6010
L000982-005	13-JUN-00	B-104 (14.5)	ZN	30.	ppm	MDK	24-AUG-00	6010
L000982-006	13-JUN-00	B-104 (15.5-16)	ZN	22.	ppm	MDK	24-AUG-00	6010
L000982-007	13-JUN-00	B-35 (2-2.5)	AG	2.	ppm	MDK	24-AUG-00	6010
			AS	12.	ppm	MDK	24-AUG-00	6010
			BI	<4.	ppm	MDK	24-AUG-00	6010
			CD	177.	ppm	MDK	24-AUG-00	6010
			CN-	<0.04	ppm	DC	28-JUN-00	335.2
			CO	9.	ppm	MDK	24-AUG-00	6010
			CR	8.	ppm	MDK	24-AUG-00	6010
			CU	141.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			NI	12.	ppm	MDK	24-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-007	13-JUN-00	B-35 (2-2.5)	PB	272.	ppm	MDK	24-AUG-00	6010
			SB	1.0*	ppm	MDK	24-AUG-00	6010
			SE	<0.8*	ppm	MDK	24-AUG-00	6010
			SN	<5.	ppm	MDK	24-AUG-00	6010
			TL	<1.*	ppm	MDK	24-AUG-00	6010
			ZN	25570.	ppm	MDK	02-SEP-00	6010
L000982-008	13-JUN-00	B-35 (5.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			AS	7.	ppm	MDK	24-AUG-00	6010
			CD	17.	ppm	MDK	24-AUG-00	6010
			CN-	<0.04	ppm	DC	28-JUN-00	335.2
			CU	13.	ppm	MDK	24-AUG-00	6010
			PB	20.	ppm	MDK	24-AUG-00	6010
			SB	<0.8*	ppm	MDK	24-AUG-00	6010
			ZN	602.	ppm	MDK	24-AUG-00	6010
L000982-009	13-JUN-00	B-35 (8.5)	CD	39.	ppm	MDK	24-AUG-00	6010
			ZN	487.	ppm	MDK	24-AUG-00	6010
L000982-010	13-JUN-00	B-35 (11.5)	CD	2.	ppm	MDK	24-AUG-00	6010
			ZN	61.	ppm	MDK	24-AUG-00	6010
L000982-011	13-JUN-00	B-35 (14.5)	ZN	57.	ppm	MDK	24-AUG-00	6010
L000982-012	13-JUN-00	B-35 (16.5-17)	ZN	97.	ppm	MDK	24-AUG-00	6010
L000982-013	13-JUN-00	B-100 (2-2.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			CD	1.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			TL	3.0*	ppm	MDK	24-AUG-00	6010
			ZN	65.	ppm	MDK	24-AUG-00	6010
L000982-014	13-JUN-00	B-100 (5.5)	TL	2.0*	ppm	MDK	24-AUG-00	6010
			ZN	223.	ppm	MDK	24-AUG-00	6010
L000982-015	13-JUN-00	B-100 (8.5)	TL	2.0*	ppm	MDK	24-AUG-00	6010
			ZN	587.	ppm	MDK	24-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-016	13-JUN-00	B-100 (11.5)	TL	1.0*	ppm	MDK	24-AUG-00	6010
			ZN	30.	ppm	MDK	24-AUG-00	6010
L000982-017	13-JUN-00	B-100 (14.5-15)	ZN	27.	ppm	MDK	24-AUG-00	6010
L000982-018	13-JUN-00	B-36 (2-2.5)	AG	1.	ppm	MDK	24-AUG-00	6010
			CD	11.	ppm	MDK	24-AUG-00	6010
			CR	7.	ppm	MDK	24-AUG-00	6010
			CU	162.	ppm	MDK	24-AUG-00	6010
			HG	0.30	ppm	EH	07-JUL-00	7471
			NI	6.	ppm	MDK	24-AUG-00	6010
			PB	74.	ppm	MDK	24-AUG-00	6010
			SB	1.0*	ppm	MDK	24-AUG-00	6010
			TL	<1.*	ppm	MDK	24-AUG-00	6010
			ZN	1370.	ppm	MDK	24-AUG-00	6010
L000982-019	13-JUN-00	B-36 (5.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			CD	<1.	ppm	MDK	24-AUG-00	6010
			CU	6.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			PB	7.	ppm	MDK	24-AUG-00	6010
			SB	<0.8*	ppm	MDK	24-AUG-00	6010
			ZN	53.	ppm	MDK	24-AUG-00	6010
L000982-020	13-JUN-00	B-36 (8.5)	ZN	407.	ppm	MDK	24-AUG-00	6010
L000982-021	13-JUN-00	B-36 (11.5)	ZN	132.	ppm	MDK	24-AUG-00	6010
L000982-022	13-JUN-00	B-36 (12.5-13)	ZN	86.	ppm	MDK	24-AUG-00	6010
L000982-023	13-JUN-00	B-37 (2-2.5)	AG	1.	ppm	MDK	24-AUG-00	6010
			AS	6.	ppm	MDK	24-AUG-00	6010
			CD	13.	ppm	MDK	24-AUG-00	6010
			CO	6.	ppm	MDK	24-AUG-00	6010
			CR	18.	ppm	MDK	24-AUG-00	6010
			CU	35.	ppm	MDK	24-AUG-00	6010
			MN	330.	ppm	MDK	24-AUG-00	6010
			NI	11.	ppm	MDK	24-AUG-00	6010
			PB	52.	ppm	MDK	24-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-023	13-JUN-00	B-37 (2-2.5)	SB	1.0*	ppm	MDK	24-AUG-00	6010
			SE	<0.8*	ppm	MDK	24-AUG-00	6010
			TL	1.0*	ppm	MDK	24-AUG-00	6010
			ZN	1700.	ppm	MDK	24-AUG-00	6010
L000982-024	13-JUN-00	B-37 (5.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			CD	1.	ppm	MDK	24-AUG-00	6010
			CR	10.	ppm	MDK	24-AUG-00	6010
			CU	8.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			SB	<0.8*	ppm	MDK	24-AUG-00	6010
			ZN	137.	ppm	MDK	24-AUG-00	6010
L000982-025	13-JUN-00	B-37 (8.5)	ZN	45.	ppm	MDK	24-AUG-00	6010
L000982-026	13-JUN-00	B-37 (11.5)	ZN	53.	ppm	MDK	24-AUG-00	6010
L000982-027	13-JUN-00	B-37 (13-14)	ZN	44.	ppm	MDK	24-AUG-00	6010
L000982-028	13-JUN-00	B-38 (2-2.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			AS	<5.	ppm	MDK	24-AUG-00	6010
			BI	<4.	ppm	MDK	24-AUG-00	6010
			CD	<1.	ppm	MDK	24-AUG-00	6010
			CO	<5.	ppm	MDK	24-AUG-00	6010
			CR	10.	ppm	MDK	24-AUG-00	6010
			CU	12.	ppm	MDK	24-AUG-00	6010
			MN	233.	ppm	MDK	24-AUG-00	6010
			NI	9.	ppm	MDK	24-AUG-00	6010
			PB	15.	ppm	MDK	24-AUG-00	6010
			SB	<0.8*	ppm	MDK	24-AUG-00	6010
			SE	<0.8*	ppm	MDK	24-AUG-00	6010
			SN	<5.	ppm	MDK	24-AUG-00	6010
			ZN	57.	ppm	MDK	24-AUG-00	6010
L000982-029	13-JUN-00	B-38 (5.5)	HG	<0.05	ppm	EH	07-JUL-00	7471
			ZN	1210.	ppm	MDK	24-AUG-00	6010
L000982-030	13-JUN-00	B-38 (8.5)	ZN	487.	ppm	MDK	24-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-031	13-JUN-00	B-38 (11.5)	ZN	45.	ppm	MDK	24-AUG-00	6010
L000982-032	13-JUN-00	B-38 (14.5)	ZN	16.	ppm	MDK	24-AUG-00	6010
L000982-033	13-JUN-00	B-38 (17.5-18)	ZN	16.	ppm	MDK	24-AUG-00	6010
L000982-034	13-JUN-00	B-39 (2-2.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			CR	9.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			MN	248.	ppm	MDK	24-AUG-00	6010
			SB	<0.8*	ppm	MDK	24-AUG-00	6010
			SN	<5.	ppm	MDK	24-AUG-00	6010
			ZN	172.	ppm	MDK	24-AUG-00	6010
L000982-035	13-JUN-00	B-39 (5.5)	ZN	25.	ppm	MDK	24-AUG-00	6010
L000982-036	13-JUN-00	B-39 (8.5)	ZN	25.	ppm	MDK	24-AUG-00	6010
L000982-037	13-JUN-00	B-39 (11.5)	ZN	28.	ppm	MDK	24-AUG-00	6010
L000982-038	13-JUN-00	B-39 (14.5)	ZN	8.	ppm	MDK	24-AUG-00	6010
L000982-039	13-JUN-00	B-39 (16-16.5)	ZN	114.	ppm	MDK	24-AUG-00	6010
L000982-040	13-JUN-00	B-40 (2-2.5)	AG	1.	ppm	MDK	24-AUG-00	6010
			AS	11.	ppm	MDK	24-AUG-00	6010
			BI	<4.	ppm	MDK	24-AUG-00	6010
			CD	8.	ppm	MDK	24-AUG-00	6010
			CO	10.	ppm	MDK	24-AUG-00	6010
			CR	17.	ppm	MDK	24-AUG-00	6010
			CU	508.	ppm	MDK	24-AUG-00	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471
			MN	355.	ppm	MDK	24-AUG-00	6010
			NI	69.	ppm	MDK	24-AUG-00	6010
			PB	267.	ppm	MDK	24-AUG-00	6010
			SB	2.0*	ppm	MDK	24-AUG-00	6010
			SN	21.	ppm	MDK	24-AUG-00	6010
			TL	2.0*	ppm	MDK	24-AUG-00	6010
			ZN	867.	ppm	MDK	24-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD			
L000982-041	13-JUN-00	B-40 (5.5)	AG	1.	ppm	MDK	24-AUG-00	6010			
			AS	12.	ppm	MDK	24-AUG-00	6010			
			CD	5.	ppm	MDK	24-AUG-00	6010			
			CO	7.	ppm	MDK	24-AUG-00	6010			
			CR	13.	ppm	MDK	24-AUG-00	6010			
			CU	164.	ppm	MDK	24-AUG-00	6010			
			NI	40.	ppm	MDK	24-AUG-00	6010			
			PB	196.	ppm	MDK	24-AUG-00	6010			
			SB	2.0*	ppm	MDK	24-AUG-00	6010			
			SN	17.	ppm	MDK	24-AUG-00	6010			
			TL	2.0*	ppm	MDK	24-AUG-00	6010			
ZN	788.	ppm	MDK	24-AUG-00	6010						
L000982-042	13-JUN-00	B-40 (8.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010			
			CD	1.	ppm	MDK	24-AUG-00	6010			
			CU	54.	ppm	MDK	24-AUG-00	6010			
			NI	13.	ppm	MDK	24-AUG-00	6010			
			PB	70.	ppm	MDK	24-AUG-00	6010			
			SB	1.0*	ppm	MDK	24-AUG-00	6010			
			SN	9.	ppm	MDK	24-AUG-00	6010			
			TL	1.0*	ppm	MDK	24-AUG-00	6010			
			ZN	395.	ppm	MDK	24-AUG-00	6010			
			L000982-043	13-JUN-00	B-40 (11.5)	CU	9.	ppm	MDK	24-AUG-00	6010
						PB	11.	ppm	MDK	24-AUG-00	6010
SB	<0.8*	ppm				MDK	24-AUG-00	6010			
SN	<5.	ppm				MDK	24-AUG-00	6010			
ZN	93.	ppm				MDK	24-AUG-00	6010			
ZN	9559.	ppm				MDK	24-AUG-00	6010			
ZN	944.	ppm				MDK	24-AUG-00	6010			
L000982-044	13-JUN-00	B-40 (14.5)				CU	10.	ppm	MDK	24-AUG-00	6010
						MN	93.	ppm	MDK	24-AUG-00	6010
						SB	<0.8*	ppm	MDK	24-AUG-00	6010
						ZN	836.	ppm	MDK	24-AUG-00	6010
L000982-045	13-JUN-00	B-40 (17-17.5)	ZN	944.	ppm	MDK	24-AUG-00	6010			
			ZN	944.	ppm	MDK	24-AUG-00	6010			
L000982-046	14-JUN-00	B-72 (2-2.5)	CU	10.	ppm	MDK	24-AUG-00	6010			
			MN	93.	ppm	MDK	24-AUG-00	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-047	14-JUN-00	B-72 (5.5)	ZN	616.	ppm	MDK	24-AUG-00	6010
L000982-048	14-JUN-00	B-72 (8.5)	ZN	676.	ppm	MDK	24-AUG-00	6010
L000982-049	14-JUN-00	B-72 (11.5)	ZN	52.	ppm	MDK	24-AUG-00	6010
L000982-050	14-JUN-00	B-72 (14.5)	ZN	56.	ppm	MDK	24-AUG-00	6010
L000982-051	14-JUN-00	B-72 (17-17.5)	ZN	42.	ppm	MDK	24-AUG-00	6010
L000982-052	14-JUN-00	B-74 (2-2.5)	CR	8.	ppm	MDK	24-AUG-00	6010
			TL	2.0*	ppm	MDK	24-AUG-00	6010
			ZN	318.	ppm	MDK	24-AUG-00	6010
L000982-053	14-JUN-00	B-74 (5.5)	TL	3.0*	ppm	MDK	24-AUG-00	6010
			ZN	53.	ppm	MDK	24-AUG-00	6010
L000982-054	14-JUN-00	B-74 (8.5)	TL	2.0*	ppm	MDK	24-AUG-00	6010
			ZN	41.	ppm	MDK	24-AUG-00	6010
L000982-055	14-JUN-00	B-74 (11.5)	TL	3.0*	ppm	MDK	25-AUG-00	6010
			ZN	31.	ppm	MDK	25-AUG-00	6010
L000982-056	14-JUN-00	B-74 (14.5)	TL	3.0*	ppm	MDK	25-AUG-00	6010
			ZN	45.	ppm	MDK	25-AUG-00	6010
L000982-057	14-JUN-00	B-74 (17.5)	TL	2.0*	ppm	MDK	25-AUG-00	6010
			ZN	42.	ppm	MDK	25-AUG-00	6010
L000982-058	14-JUN-00	B-74 (20.5-21)	TL	2.0*	ppm	MDK	25-AUG-00	6010
			ZN	41.	ppm	MDK	25-AUG-00	6010
L000982-059	14-JUN-00	B-71 (2-2.5)	AG	<0.5	ppm	MDK	24-AUG-00	6010
			CO	5.	ppm	MDK	25-AUG-00	6010
			CR	11.	ppm	MDK	25-AUG-00	6010
			CU	20.	ppm	MDK	25-AUG-00	6010
			MN	284.	ppm	MDK	25-AUG-00	6010
			TL	<1.*	ppm	MDK	25-AUG-00	6010
			ZN	130.	ppm	MDK	25-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER  
 ANALYTICAL DATA REPORT  
 Encycle/Texas

Technical Services (Project 8201)  
 Batch No: L000982

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000982-060	14-JUN-00	B-71 (5.5)	CU	11.	ppm	MDK	25-AUG-00	6010
			ZN	118.	ppm	MDK	25-AUG-00	6010
L000982-061	14-JUN-00	B-71 (8.5)	ZN	34.	ppm	MDK	25-AUG-00	6010
L000982-062	14-JUN-00	B-71 (11.5)	ZN	24.	ppm	MDK	25-AUG-00	6010
L000982-063	14-JUN-00	B-71 (14.5)	ZN	20.	ppm	MDK	25-AUG-00	6010
L000982-064	14-JUN-00	B-71 (17.5)	ZN	48.	ppm	MDK	25-AUG-00	6010
L000982-065	14-JUN-00	B-71 (20.5)	ZN	44.	ppm	MDK	25-AUG-00	6010
L000982-066	14-JUN-00	B-71 (22.5-23)	ZN	24.	ppm	MDK	25-AUG-00	6010

All Sb, Se, and Tl results may be biased low based on the spike recoveries for these elements.  
 LCS recoveries for all parameters were acceptable.

Unless otherwise noted results are not blank corrected.

  
 Approved  
  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-1		Matrix Spike	AG	94	\$Recovery	MDK	24-AUG-00	6010	
	AS		80	\$Recovery	MDK	24-AUG-00	6010		
	BA		80	\$Recovery	MDK	24-AUG-00	6010		
	BI		86	\$Recovery	MDK	24-AUG-00	6010		
	CD		78	\$Recovery	MDK	24-AUG-00	6010		
	CN		82	\$Recovery	DC	28-JUN-00	335.2		
	CO		80	\$Recovery	MDK	24-AUG-00	6010		
	CR		89	\$Recovery	MDK	24-AUG-00	6010		
	CU		100	\$Recovery	MDK	24-AUG-00	6010		
	HG		96	\$Recovery	EH	07-JUL-00	7471		
	MN		76	\$Recovery	MDK	24-AUG-00	6010		
	NI		82	\$Recovery	MDK	24-AUG-00	6010		
	PB		81	\$Recovery	MDK	24-AUG-00	6010		
	SB		48*	\$Recovery	MDK	24-AUG-00	6010		
	SE		63*	\$Recovery	MDK	24-AUG-00	6010		
	SN		84	\$Recovery	MDK	24-AUG-00	6010		
	TL		74*	\$Recovery	MDK	24-AUG-00	6010		
	V		91	\$Recovery	MDK	24-AUG-00	6010		
	ZN		81	\$Recovery	MDK	24-AUG-00	6010		
	WG000520-2			Prep Blank	AG	<0.5	ppm	MDK	24-AUG-00
AS		<5.0	ppm		MDK	24-AUG-00	6010		
BA		<5.0	ppm		MDK	24-AUG-00	6010		
BI		<4.0	ppm		MDK	24-AUG-00	6010		
CD		<1.0	ppm		MDK	24-AUG-00	6010		
CN		<0.04	ppm		DC	28-JUN-00	335.2		
CO		<5.0	ppm		MDK	24-AUG-00	6010		
CR		<5.0	ppm		MDK	24-AUG-00	6010		
CU		<5.0	ppm		MDK	24-AUG-00	6010		
HG		<0.05	ppm		EH	07-JUL-00	7471		
MN		<5.0	ppm		MDK	24-AUG-00	6010		
NI		<5.0	ppm		MDK	24-AUG-00	6010		
PB		<5.0	ppm		MDK	24-AUG-00	6010		
SB		<0.80	ppm		MDK	24-AUG-00	6010		
SE		<0.80	ppm		MDK	24-AUG-00	6010		
SN		<5.0	ppm		MDK	24-AUG-00	6010		
TL		<1.0	ppm		MDK	24-AUG-00	6010		
V		<5.0	ppm		MDK	24-AUG-00	6010		
ZN		<5.0	ppm		MDK	24-AUG-00	6010		

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-3		Lab Control Sample	AG	101	%Recovery	MDK	24-AUG-00	6010	
			AS	95	%Recovery	MDK	24-AUG-00	6010	
			BA	100	%Recovery	MDK	24-AUG-00	6010	
			BI	87	%Recovery	MDK	24-AUG-00	6010	
			CD	96	%Recovery	MDK	24-AUG-00	6010	
			CN-	92	%Recovery	DC	28-JUN-00	335.2	
			CO	95	%Recovery	MDK	24-AUG-00	6010	
			CR	99	%Recovery	MDK	24-AUG-00	6010	
			CU	107	%Recovery	MDK	24-AUG-00	6010	
			HG	110	%Recovery	EH	07-JUL-00	7471	
			MN	96	%Recovery	MDK	24-AUG-00	6010	
			NI	96	%Recovery	MDK	24-AUG-00	6010	
			PB	96	%Recovery	MDK	24-AUG-00	6010	
			SB	124**	%Recovery	MDK	24-AUG-00	6010	
			SE	73**	%Recovery	MDK	24-AUG-00	6010	
			SN	106	%Recovery	MDK	24-AUG-00	6010	
			TL	99	%Recovery	MDK	24-AUG-00	6010	
			V	100	%Recovery	MDK	24-AUG-00	6010	
			ZN	87	%Recovery	MDK	24-AUG-00	6010	
WG000520-4		Reporting Limit	AG	0.50	ppm			6010	
			AS	5.0	ppm			6010	
			BA	5.0	ppm			6010	
			BI	4.0	ppm			6010	
			CD	1.0	ppm			6010	
			CN-	0.04	ppm			335.2	
			CO	5.0	ppm			6010	
			CR	5.0	ppm			6010	
			CU	5.0	ppm			6010	
			HG	0.05	ppm			7471	
			MN	5.0	ppm			6010	
			NI	5.0	ppm			6010	
			PB	5.0	ppm			6010	
			SB	0.80	ppm			6010	
			SE	0.80	ppm			6010	
			SN	5.0	ppm			6010	
			TL	1.0	ppm			6010	
			V	5.0	ppm			6010	
			ZN	5.0	ppm			6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-5		Matrix Spike Duplicate	AG	2.1	% RPD	MDK	24-AUG-00	6010	6010
	AS		1.2	% RPD	MDK	24-AUG-00	6010	6010	
	BA		1.5	% RPD	MDK	24-AUG-00	6010	6010	
	BI		1.7	% RPD	MDK	24-AUG-00	6010	6010	
	CD		1	% RPD	MDK	24-AUG-00	6010	6010	
	CN-		1.6	% RPD	DC	28-JUN-00	335.2	6010	6010
	CO		1.9	% RPD	MDK	24-AUG-00	6010	6010	
	CR		3	% RPD	MDK	24-AUG-00	6010	6010	
	CU		3	% RPD	MDK	24-AUG-00	6010	6010	
	HG		<1	% RPD	EH	07-JUL-00	7471	6010	6010
	MN		2.3	% RPD	MDK	24-AUG-00	6010	6010	
	NI		1	% RPD	MDK	24-AUG-00	6010	6010	
	PB		1.6	% RPD	MDK	24-AUG-00	6010	6010	
	SB		1.7	% RPD	MDK	24-AUG-00	6010	6010	
	SE		1.2	% RPD	MDK	24-AUG-00	6010	6010	
	SN		<1	% RPD	MDK	24-AUG-00	6010	6010	
	TL		3	% RPD	MDK	24-AUG-00	6010	6010	
	V		2.7	% RPD	MDK	24-AUG-00	6010	6010	
	ZN		2.8	% RPD	MDK	24-AUG-00	6010	6010	
	WG000520-6			Matrix Spike	AG	94	%Recovery	MDK	24-AUG-00
AS		77	%Recovery		MDK	24-AUG-00	6010	6010	
BA		83	%Recovery		MDK	24-AUG-00	6010	6010	
BI		86	%Recovery		MDK	24-AUG-00	6010	6010	
CD		77	%Recovery		MDK	24-AUG-00	6010	6010	
CO		79	%Recovery		MDK	24-AUG-00	6010	6010	
CR		91	%Recovery		MDK	24-AUG-00	6010	6010	
CU		101	%Recovery		MDK	24-AUG-00	6010	6010	
HG		88	%Recovery		EH	07-JUL-00	7471	6010	6010
MN		92	%Recovery		MDK	24-AUG-00	6010	6010	
NI		80	%Recovery		MDK	24-AUG-00	6010	6010	
PB		78	%Recovery		MDK	24-AUG-00	6010	6010	
SB		48*	%Recovery		MDK	24-AUG-00	6010	6010	
SE		61*	%Recovery		MDK	24-AUG-00	6010	6010	
SN		82	%Recovery		MDK	24-AUG-00	6010	6010	
TL		72*	%Recovery		MDK	24-AUG-00	6010	6010	
V		93	%Recovery		MDK	24-AUG-00	6010	6010	
ZN		97	%Recovery		MDK	24-AUG-00	6010	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encyycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-7		Prep Blank	AG	<0.5	ppm	MDK	24-AUG-00	6010	6010
			AS	<5.0	ppm	MDK	24-AUG-00	6010	6010
			BA	<5.0	ppm	MDK	24-AUG-00	6010	6010
			BI	<4.0	ppm	MDK	24-AUG-00	6010	6010
			CD	<1.0	ppm	MDK	24-AUG-00	6010	6010
			CO	<5.0	ppm	MDK	24-AUG-00	6010	6010
			CR	5.0	ppm	MDK	24-AUG-00	6010	6010
			CU	<5.0	ppm	MDK	24-AUG-00	6010	6010
			HG	<0.05	ppm	EH	07-JUL-00	7471	7471
			MN	<5.0	ppm	MDK	24-AUG-00	6010	6010
			NI	<5.0	ppm	MDK	24-AUG-00	6010	6010
			PB	<5.0	ppm	MDK	24-AUG-00	6010	6010
			SB	<0.80	ppm	MDK	24-AUG-00	6010	6010
			SE	<0.80	ppm	MDK	24-AUG-00	6010	6010
			SN	<5.0	ppm	MDK	24-AUG-00	6010	6010
			TL	<1.0	ppm	MDK	24-AUG-00	6010	6010
			V	<5.0	ppm	MDK	24-AUG-00	6010	6010
			ZN	<5.0	ppm	MDK	24-AUG-00	6010	6010
			WG000520-8		Lab Control Sample	AG	107	%Recovery	MDK
AS	95	%Recovery				MDK	24-AUG-00	6010	6010
BA	103	%Recovery				MDK	24-AUG-00	6010	6010
BI	93	%Recovery				MDK	24-AUG-00	6010	6010
CD	100	%Recovery				MDK	24-AUG-00	6010	6010
CO	102	%Recovery				MDK	24-AUG-00	6010	6010
CR	103	%Recovery				MDK	24-AUG-00	6010	6010
CU	113	%Recovery				MDK	24-AUG-00	6010	6010
HG	110	%Recovery				EH	07-JUL-00	7471	7471
MN	110	%Recovery				MDK	24-AUG-00	6010	6010
NI	102	%Recovery				MDK	24-AUG-00	6010	6010
PB	97	%Recovery				MDK	24-AUG-00	6010	6010
SB	123**	%Recovery				MDK	24-AUG-00	6010	6010
SE	76	%Recovery				MDK	24-AUG-00	6010	6010
SN	109	%Recovery				MDK	24-AUG-00	6010	6010
TL	103	%Recovery				MDK	24-AUG-00	6010	6010
V	107	%Recovery				MDK	24-AUG-00	6010	6010
ZN	94	%Recovery				MDK	24-AUG-00	6010	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000520-9		Matrix Spike Duplicate	AG	2.9	% RPD	MDK	24-AUG-00	6010	6010			
			AS	1.3	% RPD	MDK	24-AUG-00	6010	6010			
			BA	1.2	% RPD	MDK	24-AUG-00	6010	6010			
			BI	<1	% RPD	MDK	24-AUG-00	6010	6010			
			CD	2.9	% RPD	MDK	24-AUG-00	6010	6010			
			CO	1.3	% RPD	MDK	24-AUG-00	6010	6010			
			CR	2.4	% RPD	MDK	24-AUG-00	6010	6010			
			CU	1.5	% RPD	MDK	24-AUG-00	6010	6010			
			HG	<1	% RPD	EH	07-JUL-00	7471	6010	6010		
			MN	2.4	% RPD	MDK	24-AUG-00	6010	6010			
			NI	1.1	% RPD	MDK	24-AUG-00	6010	6010			
			PB	<1	% RPD	MDK	24-AUG-00	6010	6010			
			SB	2.9	% RPD	MDK	24-AUG-00	6010	6010			
			SE	<1	% RPD	MDK	24-AUG-00	6010	6010			
			SN	1.8	% RPD	MDK	24-AUG-00	6010	6010			
			TL	2.4	% RPD	MDK	24-AUG-00	6010	6010			
			V	2.5	% RPD	MDK	24-AUG-00	6010	6010			
			ZN	7.6	% RPD	MDK	24-AUG-00	6010	6010			
			WG000520-10		Reporting Limitr	AG	0.50	ppm			6010	6010
						AS	5.0	ppm			6010	6010
BA	5.0	ppm						6010	6010			
CU	5.0	ppm						6010	6010			
MN	5.0	ppm						6010	6010			
NI	5.0	ppm						6010	6010			
PB	5.0	ppm						6010	6010			
SB	0.80	ppm						6010	6010			
SE	0.80	ppm						6010	6010			
SN	5.0	ppm						6010	6010			
TL	1.0	ppm						6010	6010			
V	5.0	ppm						6010	6010			
ZN	5.0	ppm						6010	6010			
AG	99	\$Recovery						25-AUG-00	6010	6010		
AS	82	\$Recovery				MDK	24-AUG-00	6010	6010	6010		
BA	83	\$Recovery				MDK	24-AUG-00	6010	6010	6010		
BI	90	\$Recovery				MDK	24-AUG-00	6010	6010	6010		
CD	80	\$Recovery				MDK	24-AUG-00	6010	6010	6010		
CO	83	\$Recovery	MDK	24-AUG-00	6010	6010	6010					
WG000520-12		Matrix Spike	AG	99	\$Recovery			6010	6010			
			AS	82	\$Recovery	MDK	24-AUG-00	6010	6010			
			BA	83	\$Recovery	MDK	24-AUG-00	6010	6010			
			BI	90	\$Recovery	MDK	24-AUG-00	6010	6010			
			CD	80	\$Recovery	MDK	24-AUG-00	6010	6010			
			CO	83	\$Recovery	MDK	24-AUG-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000520-12		Matrix Spike	CR	97	%Recovery	MDK	24-AUG-00	6010				
			CU	107	%Recovery	MDK	24-AUG-00	6010				
			MN	97	%Recovery	MDK	24-AUG-00	6010				
			NI	84	%Recovery	MDK	24-AUG-00	6010				
			PB	83	%Recovery	MDK	24-AUG-00	6010				
			SB	45*	%Recovery	MDK	24-AUG-00	6010				
			SE	65*	%Recovery	MDK	24-AUG-00	6010				
			SN	85	%Recovery	MDK	24-AUG-00	6010				
			TL	78*	%Recovery	MDK	24-AUG-00	6010				
			V	97	%Recovery	MDK	24-AUG-00	6010				
			ZN	94	%Recovery	MDK	24-AUG-00	6010				
			WG000520-13		Prep Blank	AG	<0.5	ppm		25-AUG-00	6010	
						AS	<5.0	ppm	MDK	24-AUG-00	6010	
						BA	<5.0	ppm	MDK	24-AUG-00	6010	
BI	<4.0	ppm				MDK	24-AUG-00	6010				
CD	<1.0	ppm				MDK	24-AUG-00	6010				
CO	<5.0	ppm				MDK	24-AUG-00	6010				
CR	<5.0	ppm				MDK	24-AUG-00	6010				
CU	<5.0	ppm				MDK	24-AUG-00	6010				
MN	<5.0	ppm				MDK	24-AUG-00	6010				
NI	<5.0	ppm				MDK	24-AUG-00	6010				
PB	<5.0	ppm				MDK	24-AUG-00	6010				
SB	<0.80	ppm				MDK	24-AUG-00	6010				
SE	<0.80	ppm				MDK	24-AUG-00	6010				
SN	<5.0	ppm				MDK	24-AUG-00	6010				
WG000520-14		Lab Control Sample	TL	<1.0	ppm	MDK	24-AUG-00	6010				
			V	<5.0	ppm	MDK	24-AUG-00	6010				
			ZN	<5.0	ppm	MDK	24-AUG-00	6010				
			AG	100	%Recovery		25-AUG-00	6010				
			AS	93	%Recovery	MDK	24-AUG-00	6010				
			BA	102	%Recovery	MDK	24-AUG-00	6010				
			BI	90	%Recovery	MDK	24-AUG-00	6010				
			CD	96	%Recovery	MDK	24-AUG-00	6010				
			CO	96	%Recovery	MDK	24-AUG-00	6010				
			CR	101	%Recovery	MDK	24-AUG-00	6010				
			CU	110	%Recovery	MDK	24-AUG-00	6010				
			MN	96	%Recovery	MDK	24-AUG-00	6010				

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycie/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-14		Lab Control Sample	NI	97	% Recovery	MDK	24-AUG-00		6010
			PB	96	% Recovery	MDK	24-AUG-00		6010
			SB	124**	% Recovery	MDK	24-AUG-00		6010
			SE	71**	% Recovery	MDK	24-AUG-00		6010
			SN	104	% Recovery	MDK	24-AUG-00		6010
			TL	102	% Recovery	MDK	24-AUG-00		6010
			V	102	% Recovery	MDK	24-AUG-00		6010
			ZN	88	% Recovery	MDK	24-AUG-00		6010
			AG	2.5	% RPD		25-AUG-00		6010
			AS	4.6	% RPD		24-AUG-00		6010
WG000520-15		Matrix Spike Duplicate	BA	2.6	% RPD	MDK	24-AUG-00		6010
			BI	6.9	% RPD	MDK	24-AUG-00		6010
			CD	3.7	% RPD	MDK	24-AUG-00		6010
			CO	2.6	% RPD	MDK	24-AUG-00		6010
			CR	4.3	% RPD	MDK	24-AUG-00		6010
			CU	2.3	% RPD	MDK	24-AUG-00		6010
			MN	5.4	% RPD	MDK	24-AUG-00		6010
			NI	3	% RPD	MDK	24-AUG-00		6010
			PB	2.1	% RPD	MDK	24-AUG-00		6010
			SB	3.6	% RPD	MDK	24-AUG-00		6010
			SE	4.4	% RPD	MDK	24-AUG-00		6010
			SN	3.5	% RPD	MDK	24-AUG-00		6010
			TL	2.3	% RPD	MDK	24-AUG-00		6010
			V	4.2	% RPD	MDK	24-AUG-00		6010
			ZN	8.3	% RPD	MDK	24-AUG-00		6010
WG000520-16		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
PB	5.0	ppm				6010			
SB	0.80	ppm				6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000520-16		Reporting Limit	SE	0.80	ppm				6010			
			SN	5.0	ppm				6010			
			TL	1.0	ppm					6010		
			V	5.0	ppm					6010		
			ZN	5.0	ppm					6010		
WG000520-18		Matrix Spike	AG	96	%Recovery		25-AUG-00		6010			
			AS	81	%Recovery	MDK	25-AUG-00		6010			
			BA	87	%Recovery	MDK	25-AUG-00		6010			
			BI	92	%Recovery	MDK	25-AUG-00		6010			
			CD	80	%Recovery	MDK	25-AUG-00		6010			
			CO	84	%Recovery	MDK	25-AUG-00		6010			
			CR	94	%Recovery	MDK	25-AUG-00		6010			
			CU	104	%Recovery	MDK	25-AUG-00		6010			
			MN	96	%Recovery	MDK	25-AUG-00		6010			
			NI	85	%Recovery	MDK	25-AUG-00		6010			
			PB	84	%Recovery	MDK	25-AUG-00		6010			
			SB	51*	%Recovery	MDK	25-AUG-00		6010			
			SE	63*	%Recovery	MDK	25-AUG-00		6010			
			SN	86	%Recovery	MDK	25-AUG-00		6010			
			TL	77*	%Recovery	MDK	25-AUG-00		6010			
			V	96	%Recovery	MDK	25-AUG-00		6010			
			ZN	87	%Recovery	MDK	25-AUG-00		6010			
			WG000520-19		Prep Blank	AG	<0.5	ppm		25-AUG-00		6010
						AS	<5.0	ppm	MDK	25-AUG-00		6010
BA	<5.0	ppm				MDK	25-AUG-00		6010			
BI	<4.0	ppm				MDK	25-AUG-00		6010			
CD	<1.0	ppm				MDK	25-AUG-00		6010			
CO	<5.0	ppm				MDK	25-AUG-00		6010			
CR	<5.0	ppm				MDK	25-AUG-00		6010			
CU	<5.0	ppm				MDK	25-AUG-00		6010			
MN	<5.0	ppm				MDK	25-AUG-00		6010			
NI	<5.0	ppm				MDK	25-AUG-00		6010			
PB	<5.0	ppm				MDK	25-AUG-00		6010			
SB	<0.80	ppm				MDK	25-AUG-00		6010			
SE	<0.80	ppm				MDK	25-AUG-00		6010			
SN	<5.0	ppm				MDK	25-AUG-00		6010			
TL	<1.0	ppm	MDK	25-AUG-00		6010						

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-19		Prep Blank	V	<5.0	ppm	MDK	25-AUG-00		6010
			ZN	<5.0	ppm	MDK	25-AUG-00		6010
WG000520-20		Lab Control Sample	AG	104	%Recovery	MDK	25-AUG-00		6010
			AS	93	%Recovery	MDK	25-AUG-00		6010
			BA	103	%Recovery	MDK	25-AUG-00		6010
			BI	92	%Recovery	MDK	25-AUG-00		6010
			CD	98	%Recovery	MDK	25-AUG-00		6010
			CO	99	%Recovery	MDK	25-AUG-00		6010
			CR	103	%Recovery	MDK	25-AUG-00		6010
			CU	111	%Recovery	MDK	25-AUG-00		6010
			MN	101	%Recovery	MDK	25-AUG-00		6010
			NI	101	%Recovery	MDK	25-AUG-00		6010
			PB	97	%Recovery	MDK	25-AUG-00		6010
			SB	120	%Recovery	MDK	25-AUG-00		6010
			SE	72**	%Recovery	MDK	25-AUG-00		6010
			SN	108	%Recovery	MDK	25-AUG-00		6010
			TL	98	%Recovery	MDK	25-AUG-00		6010
			V	105	%Recovery	MDK	25-AUG-00		6010
			ZN	90	%Recovery	MDK	25-AUG-00		6010
WG000520-21		Matrix Spike Duplicate	AG	<1	% RPD	MDK	25-AUG-00		6010
			AS	1.2	% RPD	MDK	25-AUG-00		6010
			BA	1.3	% RPD	MDK	25-AUG-00		6010
			BI	<1	% RPD	MDK	25-AUG-00		6010
			CD	1.2	% RPD	MDK	25-AUG-00		6010
			CO	<1	% RPD	MDK	25-AUG-00		6010
			CR	1.6	% RPD	MDK	25-AUG-00		6010
			CU	<1	% RPD	MDK	25-AUG-00		6010
			MN	1.6	% RPD	MDK	25-AUG-00		6010
			NI	<1	% RPD	MDK	25-AUG-00		6010
			PB	<1	% RPD	MDK	25-AUG-00		6010
			SB	4.7	% RPD	MDK	25-AUG-00		6010
			SE	1	% RPD	MDK	25-AUG-00		6010
			SN	1	% RPD	MDK	25-AUG-00		6010
			TL	<1	% RPD	MDK	25-AUG-00		6010
			V	1.3	% RPD	MDK	25-AUG-00		6010
			ZN	<1	% RPD	MDK	25-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8201)

Batch No: WG000520

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000520-22		Reporting Limit	AG	0.5	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010

Sb, Se, and Tl results may be biased low based on spike recoveries for these elements.  
 (\*\*) Double asterisks near Sb and Se LCS results indicate that those values were within 95% confidence interval for this (ERA 244) QC Standard.

  
 Approved  
  
 Reviewer



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 1 of 5

Project Number/Name CCOOD642.0001

Project Location ENVILO, Corpus Christi, TX

Laboratory ASPCO, Suite 604 City, USPH

Project Manager Ken Brannen

Sampler(s)/Affiliation BL / ARCADIS

ANALYSIS / METHOD / SIZE

Soils, Bacteria, Coliforms, CN, Pb, Mn, Hg, Ni, Se, Hg, T, SV, Zn  
 (16 oz glass jar w/ 1/4" hole)

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B-100 (0-0.5)	S	6/13/00 8:30			1
B-100 (2-2.5)	S	8:33			1
B-100 (5.5)	S	8:40			1
B-100 (8.5)	S	8:45			1
B-100 (11.5)	S	8:50			1
B-100 (15.5)	S	8:55			1
B-104 (0-0.5)	S	9:35			1
B-104 (2-2.5)	S	9:37			1
B-104 (5.5)	S	9:41			1
B-104 (8.5)	S	9:48			1
B-104 (11.5)	S	9:51			1
B-104 (14.5)	S	9:55			1
B-104 (5.5-16)	S	9:58			1

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: Prayantony Organization: ARCADIS Date: 6/13/00 Time: 1:00 Seal Intact? Yes

Received by: F. C. + + + Organization: ASPCO Date: 6/14/00 Time: \_\_\_\_\_ Seal Intact? Yes

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See table G1 to R1 with good quality assurance plan for test methods - confirmed  
Analyze 0-0.5 depth soil samples for all parameters hold deeper samples until notified by ARCADIS  
Results to Ken Brannen - 361-683-355

Delivery Method:  In Person  Lab Courier  Other \_\_\_\_\_

Project Number/Name CCCC (A7000)  
 Project Location Lawville, CC TX  
 Laboratory ASRCC, Salt Lake City, UT AH  
 Project Manager Ken Brundner  
 Sampler(s)/Affiliation BH / ARCADIS

ANALYSIS / METHOD / SIZE  
 TOTAL  
 Ca, Co, Cr, Cu, Fe, Ni, Pb  
 Mn, Hg, Ni, Se, Zn, Pb  
 Sn, V, Zn  
 (16 oz glass jar w/ red lid)

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B35 (0-0.5)	S	10/27/07			1
B35 (2-2.5)		10/27		Hold	1
B35 (5-5)		10/15		Hold	1
B35 (8-5)		10/27		Hold	1
B35 (11-5)		10/24		Hold	1
B35 (14-5)		10/30		Hold	1
B35 (16-5 17)		10/15		Hold	1
B36 (0-0.5)		11/08		Hold	1
B36 (2-2.5)		11/10		Hold	1
B36 (5-5)		11/14		Hold	1
B36 (8-5)		11/20		Hold	1
B36 (11-5)		11/23		Hold	1
B36 (17.5-15)		11/24		Hold	1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: [Signature] Organization: ARCADIS Date: 6/13/08 Time: 1500 Seal Intact? Yes  
 Received by: [Signature] Organization: ASRCC Date: 6/14/08 Time: \_\_\_\_\_ Seal Intact? N/A  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Special Instructions/Remarks: See Book 1



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page

3 of 5

Project Number/Name CERRAZA 2005

Project Location ENCUETE, Corpus Christi TX

Laboratory ASARC SAILLATE CITY, UT

Project Manager Ken Brundage

Sampler(s)/Affiliation BH PALLADIS

ANALYSIS / METHOD / SIZE

TOTAL 5 BOTTLES  
CA, CI, CO, CU, CN, CR, CP  
MN, Hg, Ni, Se, Pb, Zn  
TI, SN, V, Zn  
w/ kitchen lined lid  
1 lb ea glass jar

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B37 (0-0.5)	S	6/13/02 1320			1
B37 (2-2.5)	S	1325		HOLD	1
B37 (5.5)	S	1330		HOLD	1
B37 (8.5)	S	1335		HOLD	1
B37 (11.5)	S	1337		HOLD	1
<del>B37 (13.5)</del>	<del>S</del>	<del>1340</del>		<del>HOLD</del>	<del>1</del>
B37 (13.14)	S	1345		HOLD	1
B38 (0-0.5)	S	1405			1
B38 (2-2.5)	S	1407		HOLD	1
B38 (5.5)	S	1410		HOLD	1
B38 (8.5)	S	1425		HOLD	1
B38 (11.5)	S	1427		HOLD	1
B38 (14.5)	S	1430		HOLD	1
B38 (17.5-18)	S	1440		HOLD	1

Total No. of Bottles/Containers 13

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: BRYAN KELLY Organization: ARCADIS Date: 6/13/02 Time: 1300 Seal Intact? Yes

Received by: Ken Brundage Organization: ASARC Date: 6/14/02 Time: \_\_\_\_\_ Seal Intact? N/A

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See page 1

Delivery Method:  In Person  Common Carrier FedEx  Lab Courier  Other \_\_\_\_\_



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page

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Project Number/Name CCCC0647.001  
 Project Location Encule CupuCrinsh TX  
 Laboratory ASAPCO, Salt Lake City UT  
 Project Manager Ken Brumbar  
 Sampler(s)/Affiliation BH / ASAPCO

ANALYSIS / METHOD / SIZE  
 TOTAL Sb, As, Bi, Ba, Cd, Cr, Co, Cu, Ni, Pb, Mn, Hg, Ni, Se, Ag, Zn  
 16 oz glass jar  
 1/4" x 1/4" lid

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B339 (0-1.5)	S	6/13/00 1500			1
B339 (2-7.5)	S	1503		HOLD	1
B339 (5-5)	S	1510		HOLD	1
B339 (8-5)	S	1517		HOLD	1
B339 (11-5)	S	1520		HOLD	1
B339 (14-5)	S	1525		HOLD	1
B339 (16-16.5)	S	1540		HOLD	1
BAD (0-0.5)	S	1600			1
BAD (2-2.5)	S	1603		HOLD	1
BAD (5-5)	S	1607		HOLD	1
BAD (8-5)	S	1615		HOLD	1
BAD (11-5)	S	1618		HOLD	1
BAD (14-5)	S	1620		HOLD	1
BAD (17-17.5)	S	1630		HOLD	1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Total No. of Bottles/Containers 14

Relinquished by: Bruce Anthony Organization: ARCADIS Date: 6/13/00 Time: 1800 Seal Intact? Yes  
 Received by: ICAT Organization: ASAPCO Date: 6/14/00 Time: \_\_\_\_\_ Seal Intact? N/A  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See page 1

Delivery Method:  In Person  Common Carrier  Lab Courier  Other \_\_\_\_\_  
 SPECIFY \_\_\_\_\_





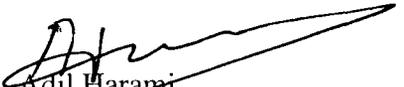
September 14, 2000

Mr. Ken Brandner  
Arcadis Geraghty & Miller

Attached are the analytical results for (13), thirteen soil samples collected on June 16, 2000 in association with the Encycle Project # CC000642.0001 and received by the laboratory on June 20, 2000.

If you need further information, please call (801) 263-5266.

Sincerely,

  
Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000945

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000945-001	16-JUN-00	B139 (0-0.5)	AG	3.	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	170.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	<5.	ppm	MDK	10-AUG-00		6010
			CR	30.	ppm	MDK	10-AUG-00		6010
			CU	5.	ppm	MDK	10-AUG-00		6010
			HG	<0.05*	ppm	EH	05-JUL-00		7471
			MN	151.	ppm	MDK	10-AUG-00		6010
			MOIST.	7.2	%	MJF	28-JUN-00		GRAV.
			NI	14.	ppm	MDK	10-AUG-00		6010
			PB	<5.	ppm	MDK	10-AUG-00		6010
			SB	1.1*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	7.	ppm	MDK	10-AUG-00		6010
			ZN	45.*	ppm	MDK	10-AUG-00		6010
L000945-002	16-JUN-00	DUPLICATE 12 (0-0.5)	AG	2.	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	149.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	3.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	<5.	ppm	MDK	10-AUG-00		6010
			CR	27.	ppm	MDK	10-AUG-00		6010
			CU	16.	ppm	MDK	10-AUG-00		6010
			HG	2.5*	ppm	EH	05-JUL-00		7471
			MN	245.	ppm	MDK	10-AUG-00		6010
			MOIST.	5.7	%	MJF	28-JUN-00		GRAV.
			NI	13.	ppm	MDK	10-AUG-00		6010
			PB	42.	ppm	MDK	10-AUG-00		6010
			SB	2.1*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000945

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000945-002	16-JUN-00	DUPLICATE 12 (0-0.5)	V	13.	ppm	MDK	10-AUG-00		6010
			ZN	254.*	ppm	MDK	10-AUG-00		6010
L000945-003	16-JUN-00	B133 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010
			AS	6.	ppm	MDK	10-AUG-00		6010
			BA	856.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	2.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	78.	ppm	MDK	10-AUG-00		6010
			CU	27.	ppm	MDK	10-AUG-00		6010
			HG	<0.05*	ppm	EH	05-JUL-00		7471
			MN	252.	ppm	MDK	10-AUG-00		6010
			MOIST.	7.7	‡	MJF	28-JUN-00		GRAV.
			NI	37.	ppm	MDK	10-AUG-00		6010
			PB	35.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	2.	ppm	MDK	10-AUG-00		6010
			V	23.	ppm	MDK	10-AUG-00		6010
			ZN	250.*	ppm	MDK	10-AUG-00		6010
L000945-004	16-JUN-00	B136 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	165.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	3.	ppm	MDK	10-AUG-00		6010
			CN-	0.06	ppm	DC	28-JUN-00		335.2
			CO	<5.	ppm	MDK	10-AUG-00		6010
			CR	21.	ppm	MDK	10-AUG-00		6010
			CU	24.	ppm	MDK	10-AUG-00		6010
			HG	0.19*	ppm	EH	05-JUL-00		7471
			MN	224.	ppm	MDK	10-AUG-00		6010
			MOIST.	8.4	‡	MJF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	10-AUG-00		6010
			PB	46.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000945

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000945-004	16-JUN-00	B136 (0-0.5)	SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	13.	ppm	MDK	10-AUG-00		6010			
			ZN	250.*	ppm	MDK	10-AUG-00		6010			
			AG	2.	ppm	MDK	10-AUG-00		6010			
			AS	5.	ppm	MDK	10-AUG-00		6010			
			BA	448.	ppm	MDK	10-AUG-00		6010			
			BI	<4.	ppm	MDK	10-AUG-00		6010			
			CD	3.	ppm	MDK	10-AUG-00		6010			
L000945-005	16-JUN-00	B131 (0-0.5)	CN-	<0.04	ppm	DC	28-JUN-00		335.2			
			CO	10.	ppm	MDK	10-AUG-00		6010			
			CR	141.	ppm	MDK	10-AUG-00		6010			
			CU	19.	ppm	MDK	10-AUG-00		6010			
			HG	0.19*	ppm	EH	05-JUL-00		7471			
			MN	127.	ppm	MDK	10-AUG-00		6010			
			MOIST.	4.2	%	MJF	28-JUN-00		GRAV.			
			NI	64.	ppm	MDK	10-AUG-00		6010			
			PB	22.	ppm	MDK	10-AUG-00		6010			
			SB	2.*	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	8.	ppm	MDK	10-AUG-00		6010			
			ZN	194.*	ppm	MDK	10-AUG-00		6010			
			L000945-006	16-JUN-00	B138 (0-0.5)	AG	3.	ppm	MDK	10-AUG-00		6010
						AS	7.	ppm	MDK	10-AUG-00		6010
						BA	376.	ppm	MDK	10-AUG-00		6010
BI	<4.	ppm				MDK	10-AUG-00		6010			
CD	18.	ppm				MDK	10-AUG-00		6010			
CN-	<0.04	ppm				DC	28-JUN-00		335.2			
CO	12.	ppm				MDK	10-AUG-00		6010			
CR	121.	ppm				MDK	10-AUG-00		6010			
CU	66.	ppm				MDK	10-AUG-00		6010			
HG	0.87*	ppm				EH	05-JUL-00		7471			
L000945-006	16-JUN-00	B138 (0-0.5)	MN	204.	ppm	MDK	10-AUG-00		6010			
			MOIST.	9.2	%	MJF	28-JUN-00		GRAV.			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000945-006	16-JUN-00	B138 (0-0.5)	NI	57.	ppm	MDK	10-AUG-00		6010
			PB	164.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	2.	ppm	MDK	10-AUG-00		6010
			SN	6.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	10.	ppm	MDK	10-AUG-00		6010
			ZN	1750.*	ppm	MDK	10-AUG-00		6010
			AG	2.	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	349.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
L000945-007	16-JUN-00	B130 (0-0.5)	CD	5.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	<5.	ppm	MDK	10-AUG-00		6010
			CR	20.	ppm	MDK	10-AUG-00		6010
			CU	38.	ppm	MDK	10-AUG-00		6010
			HG	0.07*	ppm	EH	05-JUL-00		7471
			MN	242.	ppm	MDK	10-AUG-00		6010
			MOIST.	13.	%	MJF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	10-AUG-00		6010
			PB	52.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
L000945-008	16-JUN-00	B137 (0-0.5)	SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	17.	ppm	MDK	10-AUG-00		6010
			ZN	607.*	ppm	MDK	10-AUG-00		6010
			AG	1.	ppm	MDK	10-AUG-00		6010
			AS	5.	ppm	MDK	10-AUG-00		6010
			BA	286.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	2.	ppm	MDK	10-AUG-00		6010
			CN-	0.21	ppm	DC	28-JUN-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	28.	ppm	MDK	10-AUG-00		6010
CU	25.	ppm	MDK	10-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER  
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Encycle/Texas

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Batch No: L000945

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD			
							ANALYZED	DAYS		METHOD		
L000945-008	16-JUN-00	B137 (0-0.5)	HG	<0.05*	ppm	EH	05-JUL-00		7471			
			MN	418.	ppm	MDK	10-AUG-00		6010			
			MOIST.	13.	%	MJF	28-JUN-00		GRAV.			
			NI	17.	ppm	MDK	10-AUG-00		6010			
			PB	32.	ppm	MDK	10-AUG-00		6010			
			SB	4.*	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	7.	ppm	MDK	10-AUG-00		6010			
			V	35.	ppm	MDK	10-AUG-00		6010			
			ZN	208.*	ppm	MDK	10-AUG-00		6010			
			L000945-009	16-JUN-00	B134 (0-0.5)	AG	2.	ppm	MDK	10-AUG-00		6010
						AS	<5.	ppm	MDK	10-AUG-00		6010
						BA	304.	ppm	MDK	10-AUG-00		6010
						BI	<4.	ppm	MDK	10-AUG-00		6010
						CD	1.	ppm	MDK	10-AUG-00		6010
						CN-	<0.04	ppm	DC	28-JUN-00		335.2
CO	<5.	ppm				MDK	10-AUG-00		6010			
CR	17.	ppm				MDK	10-AUG-00		6010			
CU	12.	ppm				MDK	10-AUG-00		6010			
HG	<0.05*	ppm				EH	05-JUL-00		7471			
MN	235.	ppm				MDK	10-AUG-00		6010			
MOIST.	6.7	%				MJF	28-JUN-00		GRAV.			
NI	9.	ppm				MDK	10-AUG-00		6010			
PB	26.	ppm				MDK	10-AUG-00		6010			
SB	4.*	ppm				MDK	10-AUG-00		6010			
SE	<0.8	ppm				MDK	10-AUG-00		6010			
SN	<5.	ppm				MDK	10-AUG-00		6010			
TL	4.	ppm	MDK	10-AUG-00		6010						
V	17.	ppm	MDK	10-AUG-00		6010						
ZN	124.*	ppm	MDK	10-AUG-00		6010						
L000945-010	16-JUN-00	DUPLICATE 13 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010			
			AS	<5.	ppm	MDK	10-AUG-00		6010			
			BA	238.	ppm	MDK	10-AUG-00		6010			
			BI	<4.	ppm	MDK	10-AUG-00		6010			
			CD	3.	ppm	MDK	10-AUG-00		6010			
			CN-	<0.04	ppm	DC	28-JUN-00		335.2			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000945-010	16-JUN-00	DUPLICATE 13 (0-0.5)	CO	<5.	ppm	MDK	10-AUG-00		6010			
			CR	23.	ppm	MDK	10-AUG-00		6010			
			CU	32.	ppm	MDK	10-AUG-00		6010			
			HG	0.18*	ppm	EH	05-JUL-00		7471			
			MN	183.	ppm	MDK	10-AUG-00		6010			
			MOIST.	6.1	%	MJF	28-JUN-00		GRAV.			
			NI	12.	ppm	MDK	10-AUG-00		6010			
			PB	77.	ppm	MDK	10-AUG-00		6010			
			SB	3.*	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	2.	ppm	MDK	10-AUG-00		6010			
			V	17.	ppm	MDK	10-AUG-00		6010			
			ZN	241.*	ppm	MDK	10-AUG-00		6010			
			L000945-011	16-JUN-00	DUPLICATE 14 (0-0.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
						AS	<5.	ppm	MDK	10-AUG-00		6010
						BA	310.	ppm	MDK	10-AUG-00		6010
						BI	<4.	ppm	MDK	10-AUG-00		6010
						CD	<1.	ppm	MDK	10-AUG-00		6010
						CN	0.04	ppm	DC	28-JUN-00		335.2
CO	6.	ppm				MDK	10-AUG-00		6010			
CR	18.	ppm				MDK	10-AUG-00		6010			
CU	13.	ppm				MDK	10-AUG-00		6010			
HG	<0.05*	ppm				EH	05-JUL-00		7471			
MN	387.	ppm				MDK	10-AUG-00		6010			
MOIST.	17.	%				MJF	28-JUN-00		GRAV.			
NI	13.	ppm				MDK	10-AUG-00		6010			
PB	14.	ppm				MDK	10-AUG-00		6010			
SB	3.*	ppm				MDK	10-AUG-00		6010			
SE	<0.8	ppm				MDK	10-AUG-00		6010			
SN	<5.	ppm				MDK	10-AUG-00		6010			
TL	2.	ppm				MDK	10-AUG-00		6010			
V	28.	ppm				MDK	10-AUG-00		6010			
ZN	81.*	ppm				MDK	10-AUG-00		6010			
L000945-012	16-JUN-00	B135 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010			
			AS	<5.	ppm	MDK	10-AUG-00		6010			
			BA	461.	ppm	MDK	10-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

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Encycle/Texas

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000945-012	16-JUN-00	B135 (0-0.5)	BI	<4.	ppm	MDK	10-AUG-00		6010			
			CD	3.	ppm	MDK	10-AUG-00		6010			
			CN-	0.05	ppm	DC	28-JUN-00		335.2			
			CO	5.	ppm	MDK	10-AUG-00		6010			
			CR	18.	ppm	MDK	10-AUG-00		6010			
			CU	19.	ppm	MDK	10-AUG-00		6010			
			HG	0.08*	ppm	EH	05-JUL-00		7471			
			MN	345.	ppm	MDK	10-AUG-00		6010			
			MOIST.	13.	%	MJF	28-JUN-00		GRAV.			
			NI	11.	ppm	MDK	10-AUG-00		6010			
			PB	40.	ppm	MDK	10-AUG-00		6010			
			SB	4.*	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	21.	ppm	MDK	10-AUG-00		6010			
			ZN	286.	ppm	MDK	10-AUG-00		6010			
			L000945-013	16-JUN-00	B132 (0-0.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
						AS	<5.	ppm	MDK	10-AUG-00		6010
						BA	263.	ppm	MDK	10-AUG-00		6010
BI	<4.	ppm				MDK	10-AUG-00		6010			
CD	<1.	ppm				MDK	10-AUG-00		6010			
CN-	0.08	ppm				DC	28-JUN-00		335.2			
CO	6.	ppm				MDK	10-AUG-00		6010			
CR	13.	ppm				MDK	10-AUG-00		6010			
CU	15.	ppm				MDK	10-AUG-00		6010			
HG	<0.05*	ppm				EH	05-JUL-00		7471			
MN	373.	ppm				MDK	10-AUG-00		6010			
MOIST.	16.	%				MJF	28-JUN-00		GRAV.			
NI	11.	ppm				MDK	10-AUG-00		6010			
PB	15.	ppm				MDK	10-AUG-00		6010			
SB	3.8*	ppm				MDK	10-AUG-00		6010			
SE	<0.8	ppm				MDK	10-AUG-00		6010			
SN	<5.	ppm				MDK	10-AUG-00		6010			
TL	1.	ppm				MDK	10-AUG-00		6010			
V	20.	ppm				MDK	10-AUG-00		6010			
ZN	90.	ppm				MDK	10-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

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Technical Services (Project 8201)

Batch No: L000945

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
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(\*) : Quality control data indicates a possible bias. See QC report for details. Results are reported on a dry weight basis except for CN-Hg which are on an as received basis.

  
Approved  
  
Reviewer

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000519

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000519-1		Matrix Spike	AG	102	%Recovery	MDK	10-AUG-00		6010
	AS		95	%Recovery	MDK	10-AUG-00		6010	
	BA		91	%Recovery	MDK	10-AUG-00		6010	
	BI		92	%Recovery	MDK	10-AUG-00		6010	
	CD		88	%Recovery	MDK	10-AUG-00		6010	
	CN-		82	%Recovery	DC	28-JUN-00		335.2	
	CO		92	%Recovery	MDK	10-AUG-00		6010	
	CR		121	%Recovery	MDK	10-AUG-00		6010	
	CU		106	%Recovery	MDK	10-AUG-00		6010	
	HG		80	%Recovery	EH	05-JUL-00		7471	
	MN		97	%Recovery	MDK	10-AUG-00		6010	
	NI		93	%Recovery	MDK	10-AUG-00		6010	
	PB		89	%Recovery	MDK	10-AUG-00		6010	
	SB		63*	%Recovery	MDK	10-AUG-00		6010	
	SE		79	%Recovery	MDK	10-AUG-00		6010	
	SN		90	%Recovery	MDK	10-AUG-00		6010	
	TL		79	%Recovery	MDK	10-AUG-00		6010	
	V		99	%Recovery	MDK	10-AUG-00		6010	
	ZN		74*	%Recovery	MDK	10-AUG-00		6010	
	WG000519-2			Prep Blank	AG	<0.5	ppm	MDK	10-AUG-00
AS		<5.	ppm		MDK	10-AUG-00		6010	
BA		<5.	ppm		MDK	10-AUG-00		6010	
BI		<4.	ppm		MDK	10-AUG-00		6010	
CD		<1.	ppm		MDK	10-AUG-00		6010	
CN-		<0.04	ppm		DC	28-JUN-00		335.2	
CO		<5.	ppm		MDK	10-AUG-00		6010	
CR		<5.	ppm		MDK	10-AUG-00		6010	
CU		<5.	ppm		MDK	10-AUG-00		6010	
HG		<0.05	ppm		EH	05-JUL-00		7471	
MN		<5.	ppm		MDK	10-AUG-00		6010	
NI		<5.	ppm		MDK	10-AUG-00		6010	
PB		<5.	ppm		MDK	10-AUG-00		6010	
SB		<0.8	ppm		MDK	10-AUG-00		6010	
SE		<0.8	ppm		MDK	10-AUG-00		6010	
SN		<5.	ppm		MDK	10-AUG-00		6010	
TL		1.1	ppm		MDK	10-AUG-00		6010	
V		<5.	ppm		MDK	10-AUG-00		6010	
ZN		<5.	ppm		MDK	10-AUG-00		6010	

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Batch No: WG000519

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000519-3		Lab Control Sample	AG	105	%Recovery	MDK	10-AUG-00		6010
			AS	103	%Recovery	MDK	10-AUG-00		6010
			BA	109	%Recovery	MDK	10-AUG-00		6010
			BI	96	%Recovery	MDK	10-AUG-00		6010
			CD	106	%Recovery	MDK	10-AUG-00		6010
			CN-	92	%Recovery	DC	28-JUN-00		335.2
			CO	104	%Recovery	MDK	10-AUG-00		6010
			CR	112	%Recovery	MDK	10-AUG-00		6010
			CU	117	%Recovery	MDK	10-AUG-00		6010
			HG	110	%Recovery	EH	05-JUL-00		7471
			MN	108	%Recovery	MDK	10-AUG-00		6010
			NI	105	%Recovery	MDK	10-AUG-00		6010
			PB	105	%Recovery	MDK	10-AUG-00		6010
			SB	166***	%Recovery	MDK	10-AUG-00		6010
			SE	87	%Recovery	MDK	10-AUG-00		6010
			SN	115	%Recovery	MDK	10-AUG-00		6010
			TL	106	%Recovery	MDK	10-AUG-00		6010
			V	111	%Recovery	MDK	10-AUG-00		6010
			ZN	100	%Recovery	MDK	10-AUG-00		6010
			WG000519-4		Reporting Limit	AG	0.50	ppm	
AS	5.0	ppm							6010
BA	5.0	ppm							6010
BI	4.0	ppm							6010
CD	1.0	ppm							6010
CN-	0.04	ppm							335.2
CO	5.0	ppm							6010
CR	5.0	ppm							6010
CU	5.0	ppm							6010
HG	0.05	ppm							7471
MN	5.0	ppm							6010
NI	5.0	ppm							6010
PB	5.0	ppm							6010
SB	0.80	ppm							6010
SE	0.80	ppm							6010
SN	5.0	ppm							6010
TL	1.0	ppm							6010
V	5.0	ppm							6010
ZN	5.0	ppm							6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

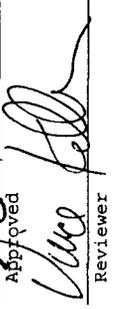
Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000519

LAB NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000519-5		Matrix Spike Duplicate	AG	7.3	% RPD	MDK	10-AUG-00		6010
			AS	8.5	% RPD	MDK	10-AUG-00		6010
			BA	8	% RPD	MDK	10-AUG-00		6010
			BI	9	% RPD	MDK	10-AUG-00		6010
			CD	8.5	% RPD	MDK	10-AUG-00		6010
			CO	8.7	% RPD	MDK	10-AUG-00		6010
			CR	11	% RPD	MDK	10-AUG-00		6010
			CU	7.9	% RPD	MDK	10-AUG-00		6010
			HG	25**	% RPD	EH	05-JUL-00	7471	
			MN	9	% RPD	MDK	10-AUG-00		6010
			NI	9	% RPD	MDK	10-AUG-00		6010
			PB	8.2	% RPD	MDK	10-AUG-00		6010
			SB	8.2	% RPD	MDK	10-AUG-00		6010
			SE	8.6	% RPD	MDK	10-AUG-00		6010
			SN	8.5	% RPD	MDK	10-AUG-00		6010
			TL	5.4	% RPD	MDK	10-AUG-00		6010
			V	8.7	% RPD	MDK	10-AUG-00		6010
			ZN	8.6	% RPD	MDK	10-AUG-00		6010
WG000519-6		Duplicate	CN-	<1	% RPD	DC	28-JUN-00		335.2
			MOIST.	1.7	% RPD	MJF	28-JUN-00		GRAV.

\* = Spikes outside acceptance limits due to matrix interference.  
 \*\* = Duplicate spike recovery was out of range due to non-homogeneity of spiked sample.  
 \*\*\* = LCS for Sb is within ERA (244) 95% confidence interval.

Approved  
  
 Reviewer  




Project Number/Name CC000042-0001  
 Project Location Enbridge Compression IX  
 Laboratory ASPHD SULLYVILLE, VT  
 Project Manager Tom Bourdon  
 Sampler(s)/Affiliation BP/ARCADIS

TERML Sp. Ms. B, Bi, Cd, Cr, Co, Cu, Ni, Pb, Mn, Mg, Ni, Se, Ag, Tl, Sn, V, Zn  
 8oz glass jar with lined lid

ANALYSIS / METHOD / SIZE

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B13A 0-0.5	S	include 830			
B13A 2-2.5		835		B135 Series	1
B13A 5.5		840		ack on Col C	1
B13A 8.5		845		B134 twice	1
B13A 11.5		850			1
B13A 14.5		855			1
B13A 17.5		900			1
B13A 20.5		930			1
B13A 23.5-24		933			1
FIELD BURNIN		930			1
DUPPLICATE 12 (see 5)					1
EQUIPMENT 12	L	V 1200			1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Total No. of Bottles/Containers 12

Relinquished by: Tom Bourdon Organization: ARCADIS Date: 6/19/00 Time: 1300 Seal Intact? Yes No N/A  
 Received by: ARCADIS Organization: ARCADIS Date: 6/20/00 Time: 1300 Seal Intact? Yes No N/A  
 Relinquished by: YI Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? Yes No N/A  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? Yes No N/A

Special Instructions/Remarks: See table G-1 in RFI work plan. Conduct Assurance Plan for test methods - extracted Analyze (G-25) depth soil samples for all parameters, had deeper samples with markers by ARCADIS Results re Ken Brundage - 361-683-1353

Delivery Method:  In Person  Common Carrier  Lab Courier  Other



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 2 of 4

Project Number/Name C0000472 DDD1  
 Project Location Enverae Cornish IA  
 Laboratory Asmelco, Salt Lake City, UT  
 Project Manager Ken Brundner  
 Sampler(s)/Affiliation BH Arcadis

ANALYSIS / METHOD / SIZE

*TRM Sp, N, B, 8  
 Calc Co, Ly, CN, B  
 Mn, Mg, Ni, Se, Pb  
 T, Sn, V, Zn  
 8 or glass jar  
 w/ film lined*

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B133 (0-0.5)	S	6/11/00 942			
B135 (2-2.5)		945		HOLD	
B136 (0-0.5)		955			
B136 (2-2.5)		957		HOLD	
B131 (0-0.5)		1057			
B131 (2-2.5)		1010		HOLD	
B138 (0-0.5)		1017			
B138 (2-2.5)		1020		HOLD	
B130 (0-0.5)		1050			
B130 (2-2.5)		1053		HOLD	
B130 (5-5)		1055		HOLD	
B130 (8-5)		1059		HOLD	
B130 (11-5)		1042		HOLD	
B130 (13.7-10.5)	S	1045		HOLD	
Total No. of Bottles/Containers					14

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: Bryan H. Hovind Organization: ARCADIS Date: 6/19/00 Time: 1800 Seal Intact? Yes  
 Received by: J. G. Pugh Organization: Asmelco Date: 6/20/00 Time: 1300 Seal Intact? N/A  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See Pugh

Delivery Method:  In Person  Common Carrier Per SA  Lab Courier  Other

Project Number/Name CC0001A7.D001  
 Project Location Enclave Corpus Christi TX  
 Laboratory APPLD / Salt Lake City UT  
 Project Manager Ken Brumber  
 Sampler(s)/Affiliation Bill Brumber

ANALYSIS / METHOD / SIZE  
 Ca (c), Cu (N), Pb  
 Mn, Mg, Ni, Se, Ag  
 Tl, Sn, V, Zn  
 (8 cc glass w/ tetrafluoro lined lid)

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B137 (0-0.5)	S	1100			1
B137 (2-2.5)		1103		HOLD	1
B137 (5.5)		1115		HOLD	1
B137 (8.5)		1120		HOLD	1
B137 (11-12)		1125		HOLD	1
B134 (0-0.5)		1133			1
B134 (2-2.5)		1135		HOLD	1
B134 (5.5)		1140		HOLD	1
B134 (8.5)		1145		HOLD	1
B134 (11-12)		1147		HOLD	1
DUPPLICATE (2-2.5)					1
DUPPLICATE (14-0.5)	S				1
EQUIPMENT 13	L	1400			1
EQUIPMENT 14	L	1505			1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: Bruce Brumber Organization: ARCADIS Date: 6/19/00 Time: 1300 Seal Intact? Yes  
 Received by: Ken Brumber Organization: ARCADIS Date: 6/10/00 Time: 1300 Seal Intact? Yes  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Special Instructions/Remarks: See page 1



ASARCO

RECEIVED

SEP 27 2000

Arcadis Geraghty & Miller

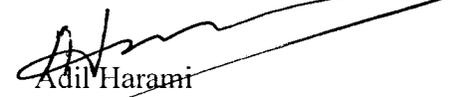
September 15, 2000

Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Please find attached the amended report for (41) ,forty one soil samples with our laboratory group number 958. This reflects the corrected date of analysis for CN- which was analyzed on June 28, 2000 rather than July 28, 2000.

If you need further information, please call (801) 263-5266.

Sincerely,



Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-001	20-JUN-00	B64 (0-0.5)	AG	0.54	ppm	MDK	02-AUG-00		6010
			AS	7.	ppm	MDK	02-AUG-00		6010
			BA	305.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	623.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	6010
			CO	7.	ppm	MDK	02-AUG-00		6010
			CR	16.	ppm	MDK	02-AUG-00		6010
			CU	13.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00	7471	6010
			MN	1725.	ppm	MDK	02-AUG-00		6010
			MOIST.	21.	%	MF	28-JUN-00		GRAV.
			NI	22.	ppm	MDK	02-AUG-00		6010
			PB	39.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	6.	ppm	MDK	02-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	27.	ppm	MDK	02-AUG-00		6010
			ZN	9393.	ppm	MDK	02-AUG-00		6010
L000958-002	20-JUN-00	B64 (2-2.5)	AG	2.	ppm	MDK	02-AUG-00		6010
			AS	7.	ppm	MDK	02-AUG-00		6010
			BA	282.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	193.	ppm	MDK	02-AUG-00		6010
			CN-	0.08	ppm	RDC	28-JUN-00	335.2	6010
			CO	30.	ppm	MDK	02-AUG-00		6010
			CR	27.	ppm	MDK	02-AUG-00		6010
			CU	540.	ppm	MDK	02-AUG-00		6010
			HG	0.08	ppm	EH	05-JUL-00	7471	6010
			MN	4188.	ppm	MDK	02-AUG-00		6010
			MOIST.	23.	%	MF	28-JUN-00		GRAV.
			NI	47.	ppm	MDK	02-AUG-00		6010
			PB	60.	ppm	MDK	02-AUG-00		6010
			SB	2.	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	9.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-002	20-JUN-00	B64 (2-2.5)	V	26.	ppm	MDK	02-AUG-00		6010
			ZN	59140.	ppm	MDK	15-AUG-00		6010
L000958-003	20-JUN-00	B64 (5.5)	AG	1.	ppm	MDK	02-AUG-00		6010
			AS	<5.	ppm	MDK	02-AUG-00		6010
			BA	203.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	3.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	6010
			CO	<5.	ppm	MDK	02-AUG-00		6010
			CR	10.	ppm	MDK	02-AUG-00		6010
			CU	11.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00	7471	6010
			MN	2305.	ppm	MDK	02-AUG-00		6010
			MOIST.	20.	%	MF	28-JUN-00	GRAV.	6010
			NI	11.	ppm	MDK	02-AUG-00		6010
			PB	14.	ppm	MDK	02-AUG-00		6010
			SB	1.	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
			V	25.	ppm	MDK	02-AUG-00		6010
			ZN	62460.	ppm	MDK	15-AUG-00		6010
L000958-004	20-JUN-00	B64 (8.5)	AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	6.	ppm	MDK	02-AUG-00		6010
			BA	292.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	<1.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	6010
			CO	7.	ppm	MDK	02-AUG-00		6010
			CR	15.	ppm	MDK	02-AUG-00		6010
			CU	9.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00	7471	6010
			MN	415.	ppm	MDK	02-AUG-00		6010
			MOIST.	23.	%	MF	28-JUN-00	GRAV.	6010
			NI	11.	ppm	MDK	02-AUG-00		6010
			PB	24.	ppm	MDK	02-AUG-00		6010
			SB	1.	ppm	MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-004	20-JUN-00	B64 (8.5)	SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	10.	ppm	MDK	02-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	36.	ppm	MDK	02-AUG-00		6010
			ZN	757.	ppm	MDK	02-AUG-00		6010
			AG	<0.5	ppm	MDK	02-AUG-00		6010
L000958-005	20-JUN-00	B64 (11.5)	AS	<5.	ppm	MDK	02-AUG-00		6010
			BA	51.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	1.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	7.	ppm	MDK	02-AUG-00		6010
			CR	29.	ppm	MDK	02-AUG-00		6010
			CU	<5.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	139.	ppm	MDK	02-AUG-00		6010
			MOIST.	6.5	%	MF	28-JUN-00		GRAV.
			NI	14.	ppm	MDK	02-AUG-00		6010
			PB	<5.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
SE	1.	ppm	MDK	02-AUG-00		6010			
SN	<5.	ppm	MDK	02-AUG-00		6010			
TL	<1.	ppm	MDK	02-AUG-00		6010			
V	8.	ppm	MDK	02-AUG-00		6010			
ZN	671.	ppm	MDK	02-AUG-00		6010			
L000958-006	20-JUN-00	B64 (14.5)	AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	<5.	ppm	MDK	02-AUG-00		6010
			BA	51.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	<1.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	13.	ppm	MDK	02-AUG-00		6010
			CR	62.	ppm	MDK	02-AUG-00		6010
			CU	<5.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	283.	ppm	MDK	02-AUG-00		6010
			MOIST.	5.3	%	MF	28-JUN-00		GRAV.

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-006	20-JUN-00	B64 (14.5)	NI	29.	ppm	MDK	02-AUG-00		6010
			PB	<5.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	1.	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
			V	6.	ppm	MDK	02-AUG-00		6010
			ZN	143.	ppm	MDK	02-AUG-00		6010
			AG	0.52	ppm	MDK	02-AUG-00		6010
			AS	<5.	ppm	MDK	02-AUG-00		6010
			BA	71.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	<1.	ppm	MDK	02-AUG-00		6010
L000958-007	20-JUN-00	B64 (15-15.5)	CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	16.	ppm	MDK	02-AUG-00		6010
			CR	82.	ppm	MDK	02-AUG-00		6010
			CU	6.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	176.	ppm	MDK	02-AUG-00		6010
			MOIST.	15.	%	MF	28-JUN-00		GRAV.
			NI	38.	ppm	MDK	02-AUG-00		6010
			PB	<5.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	1.	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
V	5.	ppm	MDK	02-AUG-00		6010			
ZN	64.	ppm	MDK	02-AUG-00		6010			
L000958-008	20-JUN-00	B61 (0-0.5)	AG	4.	ppm	MDK	02-AUG-00		6010
			AS	61.	ppm	MDK	02-AUG-00		6010
			BA	87.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	48.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	19.	ppm	MDK	02-AUG-00		6010
			CR	60.	ppm	MDK	02-AUG-00		6010
			CU	232.	ppm	MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000958-008	20-JUN-00	B61 (0-0.5)	HG	18.	ppm	EH	05-JUL-00		7471			
			MN	149.	ppm	MDK	02-AUG-00		6010			
			MOIST.	6.7	%	MF	28-JUN-00		GRAV.			
			NI	28.	ppm	MDK	02-AUG-00		6010			
			PB	317.	ppm	MDK	02-AUG-00		6010			
			SB	3.	ppm	MDK	02-AUG-00		6010			
			SE	9.	ppm	MDK	02-AUG-00		6010			
			SN	7.	ppm	MDK	02-AUG-00		6010			
			TL	<1.	ppm	MDK	02-AUG-00		6010			
			V	26.	ppm	MDK	02-AUG-00		6010			
			ZN	3288.	ppm	MDK	02-AUG-00		6010			
			L000958-009	20-JUN-00	B61 (2-2.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
						AS	6.	ppm	MDK	03-AUG-00		6010
						BA	596.	ppm	MDK	03-AUG-00		6010
						BI	<4.	ppm	MDK	03-AUG-00		6010
						CD	<1.	ppm	MDK	03-AUG-00		6010
						CN-	<0.04	ppm	RDC	28-JUN-00		335.2
						CO	6.	ppm	MDK	03-AUG-00		6010
						CR	20.	ppm	MDK	03-AUG-00		6010
CU	15.	ppm				MDK	03-AUG-00		6010			
HG	0.05	ppm				EH	05-JUL-00		7471			
MN	333.	ppm				MDK	03-AUG-00		6010			
MOIST.	17.	%				MF	28-JUN-00		GRAV.			
NI	13.	ppm				MDK	03-AUG-00		6010			
PB	13.	ppm				MDK	03-AUG-00		6010			
SB	<0.8	ppm				MDK	03-AUG-00		6010			
SE	<0.8	ppm				MDK	03-AUG-00		6010			
SN	<5.	ppm				MDK	03-AUG-00		6010			
TL	2.	ppm				MDK	02-AUG-00		6010			
V	24.	ppm				MDK	02-AUG-00		6010			
ZN	85.	ppm	MDK	03-AUG-00		6010						
L000958-010	20-JUN-00	B61 (5.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010			
			AS	6.	ppm	MDK	03-AUG-00		6010			
			BA	362.	ppm	MDK	03-AUG-00		6010			
			BI	<4.	ppm	MDK	03-AUG-00		6010			
			CD	<1.	ppm	MDK	03-AUG-00		6010			
CN-	<0.04	ppm	RDC	28-JUN-00		335.2						

ASARCO TECHNICAL SERVICES CENTER

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000958-010	20-JUN-00	B61 (5.5)	CO	5.	ppm	MDK	03-AUG-00		6010			
			CR	9.	ppm	MDK	03-AUG-00		6010			
			CU	7.	ppm	MDK	03-AUG-00		6010			
			HG	<0.05	ppm	EH	05-JUL-00		7471			
			MN	295.	ppm	MDK	03-AUG-00		6010			
			MOIST.	18.	%	MF	28-JUN-00		GRAV.			
			NI	8.	ppm	MDK	03-AUG-00		6010			
			PB	9.	ppm	MDK	03-AUG-00		6010			
			SB	<0.8	ppm	MDK	03-AUG-00		6010			
			SE	<0.8	ppm	MDK	03-AUG-00		6010			
			SN	<5.	ppm	MDK	03-AUG-00		6010			
			TL	1.	ppm	MDK	02-AUG-00		6010			
			V	35.	ppm	MDK	03-AUG-00		6010			
			ZN	44.	ppm	MDK	03-AUG-00		6010			
			L000958-011	20-JUN-00	B61 (8.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
						AS	<5.	ppm	MDK	03-AUG-00		6010
						BA	189.	ppm	MDK	03-AUG-00		6010
						BI	<4.	ppm	MDK	03-AUG-00		6010
						CD	<1.	ppm	MDK	03-AUG-00		6010
						CN-	<0.04	ppm	RDC	28-JUN-00		335.2
CO	6.	ppm				MDK	03-AUG-00		6010			
CR	12.	ppm				MDK	03-AUG-00		6010			
CU	7.	ppm				MDK	03-AUG-00		6010			
HG	<0.05	ppm				EH	05-JUL-00		7471			
MN	307.	ppm				MDK	03-AUG-00		6010			
MOIST.	18.	%				MF	28-JUN-00		GRAV.			
NI	8.	ppm				MDK	03-AUG-00		6010			
PB	9.	ppm				MDK	03-AUG-00		6010			
SB	1.	ppm				MDK	03-AUG-00		6010			
SE	1.	ppm				MDK	03-AUG-00		6010			
SN	<5.	ppm				MDK	03-AUG-00		6010			
TL	7.	ppm				MDK	02-AUG-00		6010			
V	28.	ppm				MDK	03-AUG-00		6010			
ZN	42.	ppm				MDK	03-AUG-00		6010			
L000958-012	20-JUN-00	B61 (11.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010			
			AS	<5.	ppm	MDK	03-AUG-00		6010			
			BA	58.	ppm	MDK	03-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-012	20-JUN-00	B61 (11.5)	BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	8.	ppm	MDK	03-AUG-00		6010
			CR	49.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	205.	ppm	MDK	03-AUG-00		6010
			MOIST.	4.3	%	MF	28-JUN-00		GRAV.
			NI	24.	ppm	MDK	03-AUG-00		6010
			PB	<5.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	3.	ppm	MDK	02-AUG-00		6010
			V	8.	ppm	MDK	03-AUG-00		6010
			ZN	22.	ppm	MDK	03-AUG-00		6010
L000958-013	20-JUN-00	B61 (14.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	67.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	12.	ppm	MDK	03-AUG-00		6010
			CR	73.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	370.	ppm	MDK	03-AUG-00		6010
			MOIST.	3.4	%	MF	28-JUN-00		GRAV.
			NI	34.	ppm	MDK	03-AUG-00		6010
			PB	<5.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	1.	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	7.	ppm	MDK	03-AUG-00		6010
			ZN	11.	ppm	MDK	03-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

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L000958-014	20-JUN-00	B61 (15-16)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	67.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	12.	ppm	MDK	03-AUG-00		6010
			CR	60.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	274.	ppm	MDK	03-AUG-00		6010
			MOIST.	9.5	%	MF	28-JUN-00		GRAV.
			NI	28.	ppm	MDK	03-AUG-00		6010
			PB	<5.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	1.	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	1.	ppm	MDK	02-AUG-00		6010
			V	5.	ppm	MDK	03-AUG-00		6010
			ZN	11.	ppm	MDK	03-AUG-00		6010
L000958-015	20-JUN-00	B108 (0-0.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	12.	ppm	MDK	03-AUG-00		6010
			BA	296.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	160.	ppm	MDK	03-AUG-00		6010
			CN-	0.07	ppm	RDC	28-JUN-00		335.2
			CO	7.	ppm	MDK	03-AUG-00		6010
			CR	16.	ppm	MDK	03-AUG-00		6010
			CU	60.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	602.	ppm	MDK	03-AUG-00		6010
			MOIST.	16.	%	MF	28-JUN-00		GRAV.
			NI	12.	ppm	MDK	03-AUG-00		6010
			PB	133.	ppm	MDK	03-AUG-00		6010
			SB	4.	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	17.	ppm	MDK	03-AUG-00		6010
			TL	1.	ppm	MDK	02-AUG-00		6010

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L000958-015	20-JUN-00	B108 (0-0.5)	V	22.	ppm	MDK	03-AUG-00		6010
			ZN	6933.	ppm	MDK	03-AUG-00		6010
L000958-016	20-JUN-00	B108 (2-2.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	6.	ppm	MDK	03-AUG-00		6010
			BA	209.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	49.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	6010
			CO	6.	ppm	MDK	03-AUG-00		6010
			CR	14.	ppm	MDK	03-AUG-00		6010
			CU	30.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	420.	ppm	MDK	03-AUG-00		6010
			MOIST.	19.	%	MF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	03-AUG-00		6010
			PB	52.	ppm	MDK	03-AUG-00		6010
			SB	2.	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	8.	ppm	MDK	03-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	22.	ppm	MDK	03-AUG-00		6010
			ZN	3234.	ppm	MDK	03-AUG-00		6010
L000958-017	20-JUN-00	B108 (5.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	384.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	2.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	6010
			CO	5.	ppm	MDK	03-AUG-00		6010
			CR	12.	ppm	MDK	03-AUG-00		6010
			CU	9.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	308.	ppm	MDK	03-AUG-00		6010
			MOIST.	22.	%	MF	28-JUN-00		GRAV.
			NI	10.	ppm	MDK	03-AUG-00		6010
			PB	11.	ppm	MDK	03-AUG-00		6010
			SB	1.	ppm	MDK	03-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

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LAR NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-017	20-JUN-00	B108 (5.5)	SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	3.	ppm	MDK	02-AUG-00		6010
			V	29.	ppm	MDK	03-AUG-00		6010
L000958-018	20-JUN-00	B108 (8.5)	ZN	143.	ppm	MDK	03-AUG-00		6010
			AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	328.	ppm	MDK	03-AUG-00		6010
L000958-019	20-JUN-00	B108 (11.5)	BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	6.	ppm	MDK	03-AUG-00		6010
			CR	14.	ppm	MDK	03-AUG-00		6010
			CU	7.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	355.	ppm	MDK	03-AUG-00		6010
			MOIST.	18.	%	MF	28-JUN-00		GRAV.
			NI	10.	ppm	MDK	03-AUG-00		6010
			PB	10.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	32.	ppm	MDK	03-AUG-00		6010
			ZN	53.	ppm	MDK	03-AUG-00		6010
L000958-019	20-JUN-00	B108 (11.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	284.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	<5.	ppm	MDK	03-AUG-00		6010
			CR	6.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	218.	ppm	MDK	03-AUG-00		6010
MOIST.	17.	%	MF	28-JUN-00		GRAV.			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	MOYD DAYS	METHOD
L000958-019	20-JUN-00	B108 (11.5)	NI	<5.	ppm	MDK	03-AUG-00		6010
			PB	5.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	15.	ppm	MDK	03-AUG-00		6010
			ZN	26.	ppm	MDK	03-AUG-00		6010
			AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	68.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
L000958-020	20-JUN-00	B108 (14.5)	CO	13.	ppm	MDK	03-AUG-00		6010
			CR	91.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	159.	ppm	MDK	03-AUG-00		6010
			MOIST.	2.6	%	MF	28-JUN-00		GRAV.
			NI	43.	ppm	MDK	03-AUG-00		6010
			PB	<5.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
			V	6.	ppm	MDK	03-AUG-00		6010
			ZN	25.	ppm	MDK	03-AUG-00		6010
L000958-021	20-JUN-00	B108 (16.3-17)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	46.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	14.	ppm	MDK	03-AUG-00		6010
			CR	71.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000958-021	20-JUN-00	B108 (16.3-17)	HG	<0.05	ppm	EH	05-JUL-00		7471			
			MN	142.	ppm	MDK	03-AUG-00		6010			
			MOIST.	13.	%	MF	28-JUN-00		GRAV.			
			NI	33.	ppm	MDK	03-AUG-00		6010			
			PB	<5.	ppm	MDK	03-AUG-00		6010			
			SB	<0.8	ppm	MDK	03-AUG-00		6010			
			SE	1.	ppm	MDK	03-AUG-00		6010			
			SN	<5.	ppm	MDK	03-AUG-00		6010			
			TL	1.	ppm	MDK	02-AUG-00		6010			
			V	6.	ppm	MDK	03-AUG-00		6010			
			ZN	19.	ppm	MDK	03-AUG-00		6010			
			L000958-022	20-JUN-00	B109 (0-0.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
						AS	<5.	ppm	MDK	03-AUG-00		6010
						BA	184.	ppm	MDK	03-AUG-00		6010
						BI	<4.	ppm	MDK	03-AUG-00		6010
						CD	240.	ppm	MDK	03-AUG-00		6010
						CN-	<0.04	ppm	RDC	28-JUN-00		335.2
CO	18.	ppm				MDK	03-AUG-00		6010			
CR	66.	ppm				MDK	03-AUG-00		6010			
CU	16.	ppm				MDK	03-AUG-00		6010			
HG	<0.05	ppm				EH	05-JUL-00		7471			
MN	376.	ppm				MDK	03-AUG-00		6010			
MOIST.	12.	%				MF	28-JUN-00		GRAV.			
NI	36.	ppm				MDK	03-AUG-00		6010			
PB	18.	ppm				MDK	03-AUG-00		6010			
SB	<0.8	ppm				MDK	03-AUG-00		6010			
SE	<0.8	ppm				MDK	03-AUG-00		6010			
SN	<5.	ppm				MDK	03-AUG-00		6010			
TL	2.	ppm	MDK	02-AUG-00		6010						
V	20.	ppm	MDK	03-AUG-00		6010						
ZN	15900.	ppm	MDK	15-AUG-00		6010						
L000958-023	20-JUN-00	B109 (2-2.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010			
			AS	<5.	ppm	MDK	03-AUG-00		6010			
			BA	185.	ppm	MDK	03-AUG-00		6010			
			BI	<4.	ppm	MDK	03-AUG-00		6010			
			CD	4.	ppm	MDK	03-AUG-00		6010			
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000958-023	20-JUN-00	B109 (2-2.5)	CO	5.	ppm	MDK	03-AUG-00		6010			
			CR	12.	ppm	MDK	03-AUG-00		6010			
			CU	10.	ppm	MDK	03-AUG-00		6010			
			HG	<0.05	ppm	EH	05-JUL-00		7471			
			MN	303.	ppm	MDK	03-AUG-00		6010			
			MOIST.	17.	%	MF	28-JUN-00		GRAV.			
			NI	10.	ppm	MDK	03-AUG-00		6010			
			PB	8.	ppm	MDK	03-AUG-00		6010			
			SB	<0.8	ppm	MDK	03-AUG-00		6010			
			SE	<0.8	ppm	MDK	03-AUG-00		6010			
			SN	<5.	ppm	MDK	03-AUG-00		6010			
			TL	2.	ppm	MDK	02-AUG-00		6010			
			V	19.	ppm	MDK	03-AUG-00		6010			
			ZN	246.	ppm	MDK	03-AUG-00		6010			
			L000958-024	20-JUN-00	B109 (5.5)	AG	3.	ppm	MDK	03-AUG-00		6010
						AS	6.	ppm	MDK	03-AUG-00		6010
BA	321.	ppm				MDK	03-AUG-00		6010			
BI	<4.	ppm				MDK	03-AUG-00		6010			
CD	<1.	ppm				MDK	03-AUG-00		6010			
CN-	<0.04	ppm				RDC	28-JUN-00		335.2			
CO	6.	ppm				MDK	03-AUG-00		6010			
CR	13.	ppm				MDK	03-AUG-00		6010			
CU	12.	ppm				MDK	03-AUG-00		6010			
HG	<0.05	ppm				EH	05-JUL-00		7471			
MN	401.	ppm				MDK	03-AUG-00		6010			
MOIST.	18.	%				MF	28-JUN-00		GRAV.			
NI	10.	ppm				MDK	03-AUG-00		6010			
PB	9.	ppm				MDK	03-AUG-00		6010			
SB	<0.8	ppm				MDK	03-AUG-00		6010			
SE	<0.8	ppm				MDK	03-AUG-00		6010			
SN	<5.	ppm	MDK	03-AUG-00		6010						
TL	1.	ppm	MDK	02-AUG-00		6010						
V	34.	ppm	MDK	03-AUG-00		6010						
ZN	110.	ppm	MDK	03-AUG-00		6010						
L000958-025	20-JUN-00	B109 (8.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010			
			AS	<5.	ppm	MDK	03-AUG-00		6010			
			BA	125.	ppm	MDK	03-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000958-025	20-JUN-00	B109 (8.5)	BI	<4.	ppm	MDK	03-AUG-00		6010			
			CD	<1.	ppm	MDK	03-AUG-00		6010			
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2			
			CO	<5.	ppm	MDK	03-AUG-00		6010			
			CR	11.	ppm	MDK	03-AUG-00		6010			
			CU	9.	ppm	MDK	03-AUG-00		6010			
			HG	<0.05	ppm	EH	05-JUL-00		7471			
			MN	269.	ppm	MDK	03-AUG-00		6010			
			MOIST.	17.	%	MF	28-JUN-00		GRAV.			
			NI	9.	ppm	MDK	03-AUG-00		6010			
			PB	7.	ppm	MDK	03-AUG-00		6010			
			SB	<0.8	ppm	MDK	03-AUG-00		6010			
			SE	<0.8	ppm	MDK	03-AUG-00		6010			
			SN	<5.	ppm	MDK	03-AUG-00		6010			
			TL	2.	ppm	MDK	02-AUG-00		6010			
			V	16.	ppm	MDK	03-AUG-00		6010			
			ZN	37.	ppm	MDK	03-AUG-00		6010			
			L000958-026	20-JUN-00	B109 (11.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
						AS	<5.	ppm	MDK	03-AUG-00		6010
						BA	116.	ppm	MDK	03-AUG-00		6010
BI	<4.	ppm				MDK	03-AUG-00		6010			
CD	<1.	ppm				MDK	03-AUG-00		6010			
CN-	<0.04	ppm				RDC	28-JUN-00		335.2			
CO	8.	ppm				MDK	03-AUG-00		6010			
CR	46.	ppm				MDK	03-AUG-00		6010			
CU	<5.	ppm				MDK	03-AUG-00		6010			
HG	<0.05	ppm				EH	05-JUL-00		7471			
MN	271.	ppm				MDK	03-AUG-00		6010			
MOIST.	8.2	%				MF	28-JUN-00		GRAV.			
NI	23.	ppm				MDK	03-AUG-00		6010			
PB	<5.	ppm				MDK	03-AUG-00		6010			
SB	<0.8	ppm				MDK	03-AUG-00		6010			
SE	<0.8	ppm	MDK	03-AUG-00		6010						
SN	<5.	ppm	MDK	03-AUG-00		6010						
TL	7.	ppm	MDK	02-AUG-00		6010						
V	10.	ppm	MDK	03-AUG-00		6010						
ZN	56.	ppm	MDK	03-AUG-00		6010						

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-027	20-JUN-00	B109 (14-14.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	49.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	14.	ppm	MDK	03-AUG-00		6010
			CR	85.	ppm	MDK	03-AUG-00		6010
			CU	<5.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	112.	ppm	MDK	03-AUG-00		6010
			MOIST.	7.7	%	MF	28-JUN-00		GRAV.
			NI	40.	ppm	MDK	03-AUG-00		6010
			PB	<5.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	2.	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	3.	ppm	MDK	02-AUG-00		6010
			V	6.	ppm	MDK	03-AUG-00		6010
			ZN	22.	ppm	MDK	03-AUG-00		6010
L000958-028	20-JUN-00	DUPLICATE 18 (0-0.5)	AG	1.	ppm	MDK	03-AUG-00		6010
			AS	9.	ppm	MDK	03-AUG-00		6010
			BA	123.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	74.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	60.	ppm	MDK	03-AUG-00		6010
			CR	222.	ppm	MDK	03-AUG-00		6010
			CU	1380.	ppm	MDK	03-AUG-00		6010
			HG	0.08	ppm	EH	05-JUL-00		7471
			MN	559.	ppm	MDK	03-AUG-00		6010
			MOIST.	6.5	%	MF	28-JUN-00		GRAV.
			NI	69.	ppm	MDK	03-AUG-00		6010
			PB	427.	ppm	MDK	03-AUG-00		6010
			SB	4.	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	30.	ppm	MDK	03-AUG-00		6010
			TL	3.	ppm	MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-028	20-JUN-00	DUPLICATE 18 (0-0.5)	V	10.	ppm	MDK	03-AUG-00		6010
			ZN	2200.	ppm	MDK	03-AUG-00		6010
L000958-029	20-JUN-00	DUPLICATE 19 (5.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	6.	ppm	MDK	03-AUG-00		6010
			BA	302.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	
			CO	6.	ppm	MDK	03-AUG-00		6010
			CR	17.	ppm	MDK	03-AUG-00		6010
			CU	14.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00	7471	
			MN	313.	ppm	MDK	03-AUG-00		6010
			MOIST.	17.	%	MF	28-JUN-00	GRAV.	
			NI	11.	ppm	MDK	03-AUG-00		6010
			PB	10.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010
			SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	39.	ppm	MDK	03-AUG-00		6010
			ZN	70.	ppm	MDK	03-AUG-00		6010
L000958-030	20-JUN-00	DUPLICATE 20 (8.5)	AG	<0.5	ppm	MDK	03-AUG-00		6010
			AS	<5.	ppm	MDK	03-AUG-00		6010
			BA	170.	ppm	MDK	03-AUG-00		6010
			BI	<4.	ppm	MDK	03-AUG-00		6010
			CD	<1.	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00	335.2	
			CO	5.	ppm	MDK	03-AUG-00		6010
			CR	16.	ppm	MDK	03-AUG-00		6010
			CU	12.	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00	7471	
			MN	228.	ppm	MDK	03-AUG-00		6010
			MOIST.	16.	%	MF	28-JUN-00	GRAV.	
			NI	12.	ppm	MDK	03-AUG-00		6010
			PB	8.	ppm	MDK	03-AUG-00		6010
			SB	<0.8	ppm	MDK	03-AUG-00		6010

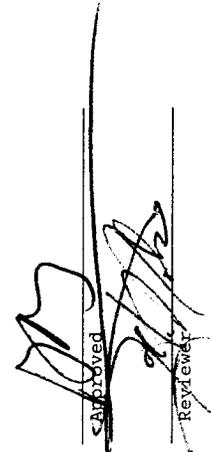
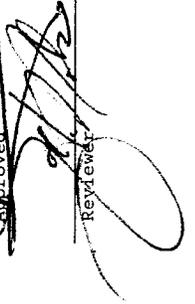
ASARCO TECHNICAL SERVICES CENTER  
 ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000958

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000958-030	20-JUN-00	DUPLICATE 20 (8.5)	SE	<0.8	ppm	MDK	03-AUG-00		6010
			SN	<5.	ppm	MDK	03-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	16.	ppm	MDK	03-AUG-00		6010
			ZN	40.	ppm	MDK	03-AUG-00		6010

  
 Approved  
  
 Reviewed

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000531

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000531-1		Matrix Spike	AG	112	%Recovery	MDK	02-AUG-00	6010	
	AS		95	%Recovery	MDK	02-AUG-00	6010		
	BA		102	%Recovery	MDK	02-AUG-00	6010		
	BI		100	%Recovery	MDK	02-AUG-00	6010		
	CD		94	%Recovery	MDK	02-AUG-00	6010		
	CN-		86	%Recovery	RDC	28-JUN-00	335.2		
	CO		98	%Recovery	MDK	02-AUG-00	6010		
	CR		120	%Recovery	MDK	02-AUG-00	6010		
	CU		119	%Recovery	MDK	02-AUG-00	6010		
	HG		102	%Recovery	EH	05-JUL-00	7471		
	MN		106	%Recovery	MDK	02-AUG-00	6010		
	NI		100	%Recovery	MDK	02-AUG-00	6010		
	PB		95	%Recovery	MDK	02-AUG-00	6010		
	SB		57	%Recovery	MDK	02-AUG-00	6010		
	SE		79	%Recovery	MDK	02-AUG-00	6010		
	SN		100	%Recovery	MDK	02-AUG-00	6010		
	TL		89	%Recovery	MDK	02-AUG-00	6010		
	V		114	%Recovery	MDK	02-AUG-00	6010		
	ZN		109	%Recovery	MDK	02-AUG-00	6010		
	WG000531-2			Prep Blank	AG	<0.50	ppm	MDK	02-AUG-00
AS		<5.0	ppm		MDK	02-AUG-00	6010		
BA		<5.0	ppm		MDK	02-AUG-00	6010		
BI		<4.0	ppm		MDK	02-AUG-00	6010		
CD		<1.0	ppm		MDK	02-AUG-00	6010		
CN-		<0.04	ppm		RDC	28-JUN-00	335.2		
CO		<5.0	ppm		MDK	02-AUG-00	6010		
CR		<5.0	ppm		MDK	02-AUG-00	6010		
CU		<5.0	ppm		MDK	02-AUG-00	6010		
HG		<0.05	ppm		EH	05-JUL-00	7471		
MN		<5.0	ppm		MDK	02-AUG-00	6010		
NI		<5.0	ppm		MDK	02-AUG-00	6010		
PB		<5.0	ppm		MDK	02-AUG-00	6010		
SB		<0.80	ppm		MDK	02-AUG-00	6010		
SE		<0.80	ppm		MDK	02-AUG-00	6010		
SN		<5.0	ppm		MDK	02-AUG-00	6010		
TL		<1.0	ppm		MDK	02-AUG-00	6010		
V		<5.0	ppm		MDK	02-AUG-00	6010		
ZN		<5.0	ppm		MDK	02-AUG-00	6010		

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Encycle/Texas

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Batch No: WG000531

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000531-3		Lab Control Sample	AG	102	%Recovery	MDK	02-AUG-00	6010	
			AS	98	%Recovery	MDK	02-AUG-00	6010	
			BA	97	%Recovery	MDK	02-AUG-00	6010	
			BI	101	%Recovery	MDK	02-AUG-00	6010	
			CD	98	%Recovery	MDK	02-AUG-00	6010	
			CN-	78	%Recovery	RDC	28-JUN-00	335.2	
			CO	98	%Recovery	MDK	02-AUG-00	6010	
			CR	102	%Recovery	MDK	02-AUG-00	6010	
			CU	108	%Recovery	MDK	02-AUG-00	6010	
			HG	120	%Recovery	EH	05-JUL-00	7471	
			MN	110	%Recovery	MDK	02-AUG-00	6010	
			NI	99	%Recovery	MDK	02-AUG-00	6010	
			PB	93	%Recovery	MDK	02-AUG-00	6010	
			SB	124	%Recovery	MDK	02-AUG-00	6010	
			SE	80	%Recovery	MDK	02-AUG-00	6010	
			SN	103	%Recovery	MDK	02-AUG-00	6010	
			TL	96	%Recovery	MDK	02-AUG-00	6010	
			V	103	%Recovery	MDK	02-AUG-00	6010	
			ZN	97	%Recovery	MDK	02-AUG-00	6010	
	WG000531-4		Reporting Limit	AG	0.50	ppm			6010
			AS	5.0	ppm			6010	
			BA	5.0	ppm			6010	
			BI	4.0	ppm			6010	
			CD	1.0	ppm			6010	
			CN-	0.04	ppm			335.2	
			CO	5.0	ppm			6010	
			CR	5.0	ppm			6010	
			CU	5.0	ppm			6010	
			HG	0.05	ppm			7471	
			MN	5.0	ppm			6010	
			NI	5.0	ppm			6010	
			PB	5.0	ppm			6010	
			SB	0.80	ppm			6010	
			SE	0.80	ppm			6010	
			SN	5.0	ppm			6010	
			TL	1.0	ppm			6010	
			V	5.0	ppm			6010	
			ZN	5.0	ppm			6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000531

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000531-5		Matrix Spike Duplicate	AG	3.6	% RPD	MDK	02-AUG-00		6010			
			AS	2.1	% RPD	MDK	02-AUG-00		6010			
			BA	4.4	% RPD	MDK	02-AUG-00		6010			
			BI	3.1	% RPD	MDK	02-AUG-00		6010			
			CD	2.1	% RPD	MDK	02-AUG-00		6010			
			CO	2	% RPD	MDK	02-AUG-00		6010			
			CR	2.1	% RPD	MDK	02-AUG-00		6010			
			CU	2.4	% RPD	MDK	02-AUG-00		6010			
			HG	<1	% RPD	EH	05-JUL-00		7471			
			MN	4.6	% RPD	MDK	02-AUG-00		6010			
			NI	1.9	% RPD	MDK	02-AUG-00		6010			
			PB	2.9	% RPD	MDK	02-AUG-00		6010			
			SB	4.1	% RPD	MDK	02-AUG-00		6010			
			SE	1.9	% RPD	MDK	02-AUG-00		6010			
			SN	2.5	% RPD	MDK	02-AUG-00		6010			
			TL	<1	% RPD	MDK	02-AUG-00		6010			
			V	2	% RPD	MDK	02-AUG-00		6010			
			ZN	2.6	% RPD	MDK	02-AUG-00		6010			
			WG000531-6		Duplicate	CN-	<1	% RPD	RDC	28-JUN-00		335.2
						MOIST.	3.4	% RPD	MF	28-JUN-00		GRAV.
WG000531-7		Matrix Spike	AG	108	%Recovery	MDK	03-AUG-00		6010			
			AS	91	%Recovery	MDK	03-AUG-00		6010			
			BA	94	%Recovery	MDK	03-AUG-00		6010			
			BI	98	%Recovery	MDK	03-AUG-00		6010			
			CD	90	%Recovery	MDK	03-AUG-00		6010			
			CN-	114	%Recovery	RDC	28-JUN-00		335.2			
			CO	95	%Recovery	MDK	03-AUG-00		6010			
			CR	99	%Recovery	MDK	03-AUG-00		6010			
			CU	116	%Recovery	MDK	03-AUG-00		6010			
			HG	76	%Recovery	EH	05-JUL-00		7471			
			MN	96	%Recovery	MDK	03-AUG-00		6010			
			NI	95	%Recovery	MDK	03-AUG-00		6010			
			PB	92	%Recovery	MDK	02-AUG-00		6010			
			SB	59	%Recovery	MDK	03-AUG-00		6010			
			SE	76	%Recovery	MDK	03-AUG-00		6010			
			SN	94	%Recovery	MDK	03-AUG-00		6010			
TL	85	%Recovery	MDK	03-AUG-00		6010						

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project )

Batch No: WG000531

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000531-7		Matrix Spike	V	100	%Recovery	MDK	03-AUG-00		6010
			ZN	95	%Recovery	MDK	03-AUG-00		6010
WG000531-8		Prep Blank	AG	<0.50	ppm	MDK	03-AUG-00		6010
			AS	<5.0	ppm	MDK	03-AUG-00		6010
			BA	<5.0	ppm	MDK	03-AUG-00		6010
			BI	<4.0	ppm	MDK	03-AUG-00		6010
			CD	<1.0	ppm	MDK	03-AUG-00		6010
			CN-	<0.04	ppm	RDC	28-JUN-00		335.2
			CO	<5.0	ppm	MDK	03-AUG-00		6010
			CR	<5.0	ppm	MDK	03-AUG-00		6010
			CU	<5.0	ppm	MDK	03-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	<5.0	ppm	MDK	03-AUG-00		6010
			NI	<5.0	ppm	MDK	03-AUG-00		6010
			PB	<5.0	ppm	MDK	02-AUG-00		6010
			SB	<0.80	ppm	MDK	03-AUG-00		6010
			SE	<0.80	ppm	MDK	03-AUG-00		6010
			SN	<5.0	ppm	MDK	03-AUG-00		6010
			TL	<1.0	ppm	MDK	03-AUG-00		6010
			V	<5.0	ppm	MDK	03-AUG-00		6010
	ZN	<5.0	ppm	MDK	03-AUG-00		6010		
WG000531-9		Lab Control Sample	AG	106	%Recovery	MDK	03-AUG-00		6010
			AS	98	%Recovery	MDK	03-AUG-00		6010
			BA	99	%Recovery	MDK	03-AUG-00		6010
			BI	96	%Recovery	MDK	03-AUG-00		6010
			CD	97	%Recovery	MDK	03-AUG-00		6010
			CN-	108	%Recovery	RDC	28-JUN-00		335.2
			CO	100	%Recovery	MDK	03-AUG-00		6010
			CR	103	%Recovery	MDK	03-AUG-00		6010
			CU	110	%Recovery	MDK	03-AUG-00		6010
			HG	113	%Recovery	EH	05-JUL-00		7471
			MN	108	%Recovery	MDK	03-AUG-00		6010
			NI	102	%Recovery	MDK	03-AUG-00		6010
			PB	94	%Recovery	MDK	02-AUG-00		6010
			SB	123	%Recovery	MDK	03-AUG-00		6010
			SE	79	%Recovery	MDK	03-AUG-00		6010
			SN	105	%Recovery	MDK	03-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project )

Batch No: WG000531

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000531-9		Lab Control Sample	TL	96	%Recovery	MDK	03-AUG-00		6010
			V	105	%Recovery	MDK	03-AUG-00		6010
			ZN	98	%Recovery	MDK	03-AUG-00		6010
WG000531-10		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
	WG000531-11		Matrix Spike Duplicate	TL	1.0	ppm			
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010
			AG	2.2	% RPD	MDK	03-AUG-00		6010
			AS	5	% RPD	MDK	03-AUG-00		6010
			BA	3.9	% RPD	MDK	03-AUG-00		6010
			BI	4.6	% RPD	MDK	03-AUG-00		6010
			CD	4.2	% RPD	MDK	03-AUG-00		6010
			CO	3	% RPD	MDK	03-AUG-00		6010
			CR	4.8	% RPD	MDK	03-AUG-00		6010
			CU	2.8	% RPD	MDK	03-AUG-00		6010
			HG	28	% RPD	BH	05-JUL-00		7471
			MN	2.7	% RPD	MDK	03-AUG-00		6010
			NI	4.5	% RPD	MDK	03-AUG-00		6010
			PB	4.9	% RPD	MDK	03-AUG-00		6010
			SB	1.1	% RPD	MDK	03-AUG-00		6010
			SE	4.8	% RPD	MDK	03-AUG-00		6010
		SN	5.6	% RPD	MDK	03-AUG-00		6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

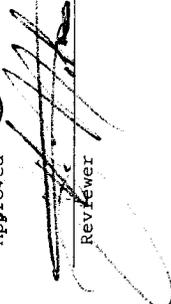
Encycle/Texas

Technical Services (Project )

Batch No: WG000531

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000531-11		Matrix Spike Duplicate	TL	6.5	% RPD	MDK	02-AUG-00		6010
			V	5.1	% RPD	MDK	03-AUG-00		6010
			ZN	3.3	% RPD	MDK	03-AUG-00		6010
WG000531-12		Duplicate	CN-	<1	% RPD	RDC	28-JUN-00		335.2
			MOIST.	2.5	% RPD	MF	28-JUN-00		GRAV.

  
 \_\_\_\_\_  
 Analyst

  
 \_\_\_\_\_  
 Reviewer







ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 3 of 6

Project Number/Name CC00007001

Project Location Utah Corps (Highway)

Laboratory ASPCO Salt Lake City, UT

Project Manager Van Brumder

Sampler(s)/Affiliation B11 / ARCADIS

ANALYSIS / METHOD / SIZE

(A) (C) (N) (R) (S) (T) (U) (V) (W) (X) (Y) (Z)  
 (A) (C) (N) (R) (S) (T) (U) (V) (W) (X) (Y) (Z)  
 (A) (C) (N) (R) (S) (T) (U) (V) (W) (X) (Y) (Z)

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B01 0-0.5	S	11/20/00 1107			1
B01 (2-2.5)		1110			1
B01 5-5		1115			1
B01 8-5		1120			1
B01 11-5		1125			1
B01 14-5		1135			1
B01 15-16		1137			1
B02 0-0.5		1305		HOLD	1
B02 2-2.5		1308		HOLD	1
B02 5-5		1312		HOLD	1
B02 8-5		1320		HOLD	1
B02 11-5		1325		HOLD	1
B02 14-5		1330		HOLD	1
B02 15-16	S	1333		HOLD	1

Sample Matrix: L = Liquid; S = Solid; A = Air

Total No. of Bottles/Containers 14

Relinquished by: Matthew Organization: ARCADIS Date: 01/20/00 Time: 12:00 Seal Intact? Yes

Received by: Matthew Organization: ASPCO Date: 6/22/00 Time: 10:45 Seal Intact? N/A

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: STOP OUT PARINGS - RUN ALL OF B01, HOLD ALL B02 + B03 UNTIL NOTIFIED BY DRACIS

Results to be in Birmingham

Delivery Method:  In Person  Common Carrier FedEx  Lab Courier  Other



ARCADIS GERAGHTY & MILLER

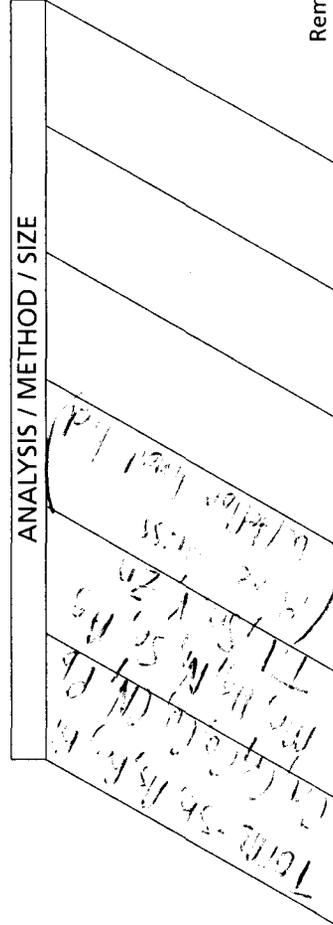
Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page \_\_\_\_\_

A of 6

Project Number/Name 02-000-0001  
 Project Location San Jose, CA  
 Laboratory ASAC Substation, CA  
 Project Manager Joe Barlow  
 Sampler(s)/Affiliation ELI PERAZI



ANALYSIS / METHOD / SIZE

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B03 0-0.5	S	6/10/00 1345			1
B03 2-2.5	S	6/10/00 1348			1
B03 5-5	S	6/10/00 1353			1
B03 8-5	S	6/10/00 1400			1
B03 11-5	S	6/10/00 1403			1
B03 14-5	S	6/10/00 1410			1
B03 (15-16)	S	6/10/00 1415			1
Total No. of Bottles/Containers					7

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: ELI PERAZI Organization: MILPITAS Date: 6/10/00 Time: 1400 Seal Intact? Yes  
 Received by: JOE BARLOW Organization: ASAC Date: 6/22/00 Time: 1045 Seal Intact? N/A

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: HAND DELIV BY BUS WITH PROTECTION BY MILPITAS

Delivery Method:  In Person  Common Carrier FEDEX  Lab Courier  Other \_\_\_\_\_

SPECIFY







September 18, 2000

Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (31), thirty one soil samples Collected on June 13, 2000 in association with the Encycle Project # CC000642.0001 and received by the laboratory on June 14, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,

A handwritten signature in black ink, appearing to read "Adil Harani", is written over a horizontal line. The signature is fluid and cursive.

Adil Harani  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-001	13-JUN-00	B-100 (0-0.5)	AG	5.	ppm	MDK	04-AUG-00		6010
			AS	<5.	ppm	MDK	04-AUG-00		6010
			BA	134.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	13.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00		335.2
			CO	<5.	ppm	MDK	04-AUG-00		6010
			CR	14.*	ppm	MDK	04-AUG-00		6010
			CU	17.*	ppm	MDK	04-AUG-00		6010
			HG	0.29	ppm	EH	30-JUN-00		7471
			MN	185.	ppm	MDK	04-AUG-00		6010
			MOIST.	18.	%	MJF	25-JUN-00		GRAV.
			NI	10.	ppm	MDK	04-AUG-00		6010
			PB	27.	ppm	MDK	04-AUG-00		6010
			SB	<0.8*	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.	ppm	MDK	04-AUG-00		6010
			TL	2.	ppm	MDK	04-AUG-00		6010
			V	19.	ppm	MDK	04-AUG-00		6010
			ZN	516.	ppm	MDK	04-AUG-00		6010
L000919-002	13-JUN-00	B-104 (0-0.5)	AG	74.	ppm	MDK	04-AUG-00		6010
			AS	603.	ppm	MDK	04-AUG-00		6010
			BA	990.	ppm	MDK	04-AUG-00		6010
			BI	18.	ppm	MDK	04-AUG-00		6010
			CD	566.	ppm	MDK	04-AUG-00		6010
			CN-	0.88	ppm	DC	21-JUN-00		335.2
			CO	93.	ppm	MDK	04-AUG-00		6010
			CR	102.*	ppm	MDK	04-AUG-00		6010
			CU	6961.*	ppm	MDK	04-AUG-00		6010
			HG	3.4	ppm	EH	30-JUN-00		7471
			MN	2665.	ppm	MDK	04-AUG-00		6010
			MOIST.	18.	%	MJF	25-JUN-00		GRAV.
			NI	110.	ppm	MDK	04-AUG-00		6010
			PB	5971.	ppm	MDK	04-AUG-00		6010
			SB	64.*	ppm	MDK	04-AUG-00		6010
			SE	6.	ppm	MDK	04-AUG-00		6010
			SN	128.	ppm	MDK	04-AUG-00		6010
			TL	<1.	ppm	MDK	04-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-002	13-JUN-00	B-104 (0-0.5)	V	23.	ppm	MDK	04-AUG-00		6010
			ZN	130200.	ppm	MDK	16-SEP-00		6010
L000919-003	13-JUN-00	B-35 (0-0.5)	AG	31.	ppm	MDK	04-AUG-00		6010
			AS	110.	ppm	MDK	04-AUG-00		6010
			BA	665.	ppm	MDK	04-AUG-00		6010
			BI	41.	ppm	MDK	04-AUG-00		6010
			CD	785.	ppm	MDK	04-AUG-00		6010
			CN-	1.2	ppm	DC	21-JUN-00		335.2
			CO	64.	ppm	MDK	04-AUG-00		6010
			CR	235.*	ppm	MDK	04-AUG-00		6010
			CU	2272.*	ppm	MDK	04-AUG-00		6010
			HG	1.5	ppm	EH	30-JUN-00		7471
			MN	234.	ppm	MDK	04-AUG-00		6010
			MOIST.	8.6	%	MJF	25-JUN-00		GRAV.
			NI	403.	ppm	MDK	04-AUG-00		6010
			PB	12260.	ppm	MDK	04-AUG-00		6010
			SB	28.*	ppm	MDK	04-AUG-00		6010
			SE	10.	ppm	MDK	04-AUG-00		6010
			SN	116.	ppm	MDK	04-AUG-00		6010
			TL	15.	ppm	MDK	04-AUG-00		6010
			V	23.	ppm	MDK	04-AUG-00		6010
			ZN	4283.	ppm	MDK	04-AUG-00		6010
L000919-004	13-JUN-00	B-36 (0-0.5)	AG	5.	ppm	MDK	04-AUG-00		6010
			AS	12.	ppm	MDK	04-AUG-00		6010
			BA	170.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	31.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00		335.2
			CO	6.	ppm	MDK	04-AUG-00		6010
			CR	47.*	ppm	MDK	04-AUG-00		6010
			CU	126.*	ppm	MDK	04-AUG-00		6010
			HG	1.7	ppm	EH	30-JUN-00		7471
			MN	235.	ppm	MDK	04-AUG-00		6010
			MOIST.	12.	%	MJF	25-JUN-00		GRAV.
			NI	26.	ppm	MDK	04-AUG-00		6010
			PB	160.	ppm	MDK	04-AUG-00		6010
			SB	2.*	ppm	MDK	04-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-004	13-JUN-00	B-36 (0-0.5)	SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	6.	ppm	MDK	04-AUG-00		6010
			TL	2.	ppm	MDK	04-AUG-00		6010
			V	19.	ppm	MDK	04-AUG-00		6010
			ZN	2490.	ppm	MDK	04-AUG-00		6010
			AG	14.	ppm	MDK	04-AUG-00		6010
			AS	44.	ppm	MDK	04-AUG-00		6010
			BA	310.	ppm	MDK	04-AUG-00		6010
			BI	4.	ppm	MDK	04-AUG-00		6010
			CD	155.	ppm	MDK	04-AUG-00		6010
L000919-005	13-JUN-00	B-37 (0-0.5)	CN-	<0.04	ppm	DC	21-JUN-00		335.2
			CO	16.	ppm	MDK	04-AUG-00		6010
			CR	61.*	ppm	MDK	04-AUG-00		6010
			CU	393.*	ppm	MDK	04-AUG-00		6010
			HG	7.2	ppm	EH	30-JUN-00		7471
			MN	640.	ppm	MDK	04-AUG-00		6010
			MOIST.	11.	%	MJF	25-JUN-00		GRAV.
			NI	42.	ppm	MDK	04-AUG-00		6010
			PB	985.	ppm	MDK	04-AUG-00		6010
			SB	11.*	ppm	MDK	04-AUG-00		6010
L000919-006	13-JUN-00	B-38 (0-0.5)	SE	6.	ppm	MDK	04-AUG-00		6010
			SN	27.	ppm	MDK	04-AUG-00		6010
			TL	<1.	ppm	MDK	04-AUG-00		6010
			V	17.	ppm	MDK	04-AUG-00		6010
			ZN	18660.	ppm	MDK	16-SEP-00		6010
			AG	9.	ppm	MDK	04-AUG-00		6010
			AS	43.	ppm	MDK	04-AUG-00		6010
			BA	222.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	100.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00		335.2
			CO	12.	ppm	MDK	04-AUG-00		6010
			CR	53.*	ppm	MDK	04-AUG-00		6010
			CU	405.*	ppm	MDK	04-AUG-00		6010
			HG	0.35	ppm	EH	30-JUN-00		7471
			MN	939.	ppm	MDK	04-AUG-00		6010
			MOIST.	17.	%	MJF	25-JUN-00		GRAV.

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-006	13-JUN-00	B-38 (0-0.5)	NI	32.	ppm	MDK	04-AUG-00		6010
			PB	1020.	ppm	MDK	04-AUG-00		6010
			SB	8.*	ppm	MDK	04-AUG-00		6010
			SE	1.	ppm	MDK	04-AUG-00		6010
			SN	19.	ppm	MDK	04-AUG-00		6010
			TL	<1.	ppm	MDK	04-AUG-00		6010
			V	24.	ppm	MDK	04-AUG-00		6010
			ZN	13540.	ppm	MDK	16-SEP-00		6010
			AG	2.	ppm	MDK	04-AUG-00		6010
			AS	6.	ppm	MDK	04-AUG-00		6010
			BA	233.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
L000919-007	13-JUN-00	B-39 (0-0.5)	CD	3.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00	335.2	6010
			CO	7.	ppm	MDK	04-AUG-00		6010
			CR	24.*	ppm	MDK	04-AUG-00		6010
			CU	28.*	ppm	MDK	04-AUG-00		6010
			HG	1.1	ppm	EH	30-JUN-00	7471	6010
			MN	371.	ppm	MDK	04-AUG-00		6010
			MOIST.	21.	%	MJF	25-JUN-00	GRAV.	6010
			NI	16.	ppm	MDK	04-AUG-00		6010
			PE	60.	ppm	MDK	04-AUG-00		6010
			SB	3.*	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
L000919-008	13-JUN-00	B-40 (0-0.5)	SN	9.	ppm	MDK	04-AUG-00		6010
			TL	1.	ppm	MDK	04-AUG-00		6010
			V	28.	ppm	MDK	04-AUG-00		6010
			ZN	1700.	ppm	MDK	04-AUG-00		6010
			AG	11.	ppm	MDK	04-AUG-00		6010
			AS	140.	ppm	MDK	04-AUG-00		6010
			BA	546.	ppm	MDK	04-AUG-00		6010
			BI	5.	ppm	MDK	04-AUG-00		6010
			CD	53.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00	335.2	6010
			CO	21.	ppm	MDK	04-AUG-00		6010
			CR	40.*	ppm	MDK	04-AUG-00		6010
CU	1050.*	ppm	MDK	04-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD			
							ANALYZED	DAYS		METHOD		
L000919-008	13-JUN-00	B-40 (0-0.5)	HG	0.26	ppm	EH	30-JUN-00		7471			
			MIN	3786.	ppm	MDK	04-AUG-00		6010			
			MOIST.	13.	%	MJF	25-JUN-00		GRAV.			
			NI	178.	ppm	MDK	04-AUG-00		6010			
			PB	2420.	ppm	MDK	04-AUG-00		6010			
			SB	96.*	ppm	MDK	04-AUG-00		6010			
			SE	<0.8	ppm	MDK	04-AUG-00		6010			
			SN	253.	ppm	MDK	04-AUG-00		6010			
			TL	<1.	ppm	MDK	04-AUG-00		6010			
			V	27.	ppm	MDK	04-AUG-00		6010			
			ZN	29800.	ppm	MDK	16-SEP-00		6010			
			L000919-009	13-JUN-00	DUPLICATE 4	AG	47.	ppm	MDK	04-AUG-00		6010
						AS	428.	ppm	MDK	04-AUG-00		6010
						BA	418.	ppm	MDK	04-AUG-00		6010
						BI	87.	ppm	MDK	04-AUG-00		6010
						CD	1668.	ppm	MDK	04-AUG-00		6010
						CN-	0.60	ppm	DC	21-JUN-00		335.2
						CO	272.	ppm	MDK	04-AUG-00		6010
						CR	311.*	ppm	MDK	04-AUG-00		6010
CU	11060.*	ppm				MDK	04-AUG-00		6010			
HG	7.8	ppm				EH	30-JUN-00		7471			
MN	276.	ppm				MDK	04-AUG-00		6010			
MOIST.	12.	%				MJF	25-JUN-00		GRAV.			
NI	1600.	ppm				MDK	04-AUG-00		6010			
PB	42850.	ppm				MDK	16-SEP-00		6010			
SB	93.*	ppm				MDK	04-AUG-00		6010			
SE	24.	ppm				MDK	04-AUG-00		6010			
SN	317.	ppm				MDK	04-AUG-00		6010			
TL	20.	ppm				MDK	04-AUG-00		6010			
V	20.	ppm				MDK	04-AUG-00		6010			
ZN	8811.	ppm	MDK	04-AUG-00		6010						
L000919-010	13-JUN-00	DUPLICATE 5	AG	23.	ppm	MDK	04-AUG-00		6010			
			AS	77.	ppm	MDK	04-AUG-00		6010			
			BA	294.	ppm	MDK	04-AUG-00		6010			
			BI	9.	ppm	MDK	04-AUG-00		6010			
			CD	369.	ppm	MDK	04-AUG-00		6010			
			CN-	<0.04	ppm	DC	21-JUN-00		335.2			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000919-010	13-JUN-00	DUPLICATE 5	CO	20.	ppm	MDK	04-AUG-00		6010			
			CR	38.*	ppm	MDK	04-AUG-00		6010			
			CU	887.*	ppm	MDK	04-AUG-00		6010			
			HG	0.92	ppm	EH	30-JUN-00		7471			
			MN	1000.	ppm	MDK	04-AUG-00		6010			
			MOIST.	10.	%	MJF	25-JUN-00		GRAV.			
			NI	38.	ppm	MDK	04-AUG-00		6010			
			PB	2170.	ppm	MDK	04-AUG-00		6010			
			SB	20.*	ppm	MDK	04-AUG-00		6010			
			SE	1.	ppm	MDK	04-AUG-00		6010			
			SN	46.	ppm	MDK	04-AUG-00		6010			
			TL	<1.	ppm	MDK	04-AUG-00		6010			
			V	11.	ppm	MDK	04-AUG-00		6010			
			ZN	34130.	ppm	MDK	16-SEP-00		6010			
			L000919-011	13-JUN-00	DUPLICATE 6	AG	4.	ppm	MDK	04-AUG-00		6010
						AS	13.	ppm	MDK	04-AUG-00		6010
						BA	261.	ppm	MDK	04-AUG-00		6010
						BI	<4.	ppm	MDK	04-AUG-00		6010
						CD	14.	ppm	MDK	04-AUG-00		6010
						CN-	<0.04	ppm	DC	21-JUN-00		335.2
						CO	7.	ppm	MDK	04-AUG-00		6010
						CR	22.*	ppm	MDK	04-AUG-00		6010
						CU	132.*	ppm	MDK	04-AUG-00		6010
HG	<0.05	ppm				EH	30-JUN-00		7471			
MN	309.	ppm				MDK	04-AUG-00		6010			
MOIST.	16.	%				MJF	25-JUN-00		GRAV.			
NI	39.	ppm				MDK	04-AUG-00		6010			
PB	274.	ppm				MDK	04-AUG-00		6010			
SB	7.*	ppm				MDK	04-AUG-00		6010			
SE	<0.8	ppm				MDK	04-AUG-00		6010			
SN	22.	ppm				MDK	04-AUG-00		6010			
TL	8.	ppm				MDK	04-AUG-00		6010			
V	23.	ppm				MDK	04-AUG-00		6010			
ZN	3195.	ppm				MDK	04-AUG-00		6010			
L000919-012	14-JUN-00	B71 (0-0.5)				AG	1.	ppm	MDK	04-AUG-00		6010
						AS	<5.	ppm	MDK	04-AUG-00		6010
						BA	65.	ppm	MDK	04-AUG-00		6010

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L000919-012	14-JUN-00	B71 (0-0.5)	BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	3.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00		335.2
			CO	20.	ppm	MDK	04-AUG-00		6010
			CR	28.*	ppm	MDK	04-AUG-00		6010
			CU	178.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00		7471
			MN	2356.	ppm	MDK	04-AUG-00		6010
			MOIST.	18.	%	MJF	25-JUN-00		GRAV.
			NI	17.	ppm	MDK	04-AUG-00		6010
			PB	31.	ppm	MDK	04-AUG-00		6010
			SB	<0.8*	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.	ppm	MDK	04-AUG-00		6010
			TL	3.	ppm	MDK	04-AUG-00		6010
			V	13.	ppm	MDK	04-AUG-00		6010
			ZN	983.	ppm	MDK	04-AUG-00		6010
L000919-013	14-JUN-00	DUPLICATE 7	AG	144.	ppm	MDK	04-AUG-00		6010
			AS	698.	ppm	MDK	04-AUG-00		6010
			BA	1329.	ppm	MDK	16-SEP-00		6010
			BI	18.	ppm	MDK	04-AUG-00		6010
			CD	696.	ppm	MDK	04-AUG-00		6010
			CN-	5.5	ppm	DC	27-JUN-00		335.2
			CO	291.	ppm	MDK	04-AUG-00		6010
			CR	215.*	ppm	MDK	04-AUG-00		6010
			CU	5575.*	ppm	MDK	04-AUG-00		6010
			HG	2.8	ppm	EH	30-JUN-00		7471
			MN	3730.	ppm	MDK	16-SEP-00		6010
			MOIST.	16.	%	MJF	25-JUN-00		GRAV.
			NI	234.	ppm	MDK	04-AUG-00		6010
			PB	18730.	ppm	MDK	04-AUG-00		6010
			SB	112.*	ppm	MDK	04-AUG-00		6010
			SE	11.	ppm	MDK	04-AUG-00		6010
			SN	234.	ppm	MDK	04-AUG-00		6010
			TL	<1.	ppm	MDK	04-AUG-00		6010
			V	43.	ppm	MDK	04-AUG-00		6010
			ZN	78920.	ppm	MDK	16-SEP-00		6010

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L000919-014	14-JUN-00	DUPLICATE 8	AG	31.	ppm	MDK	04-AUG-00	6010				
			AS	104.	ppm	MDK	04-AUG-00	6010				
			BA	444.	ppm	MDK	04-AUG-00	6010				
			BI	7.	ppm	MDK	04-AUG-00	6010				
			CD	374.	ppm	MDK	04-AUG-00	6010				
			CN-	0.66	ppm	DC	21-JUN-00	335.2				
			CO	52.	ppm	MDK	04-AUG-00	6010				
			CR	82.*	ppm	MDK	04-AUG-00	6010				
			CU	1380.*	ppm	MDK	04-AUG-00	6010				
			HG	1.4	ppm	EH	30-JUN-00	7471				
			MN	1370.	ppm	MDK	04-AUG-00	6010				
			MOIST.	13.	%	MJF	25-JUN-00	GRAV.				
			NI	93.	ppm	MDK	04-AUG-00	6010				
			PB	4214.	ppm	MDK	04-AUG-00	6010				
			SB	22.*	ppm	MDK	04-AUG-00	6010				
			SE	3.	ppm	MDK	04-AUG-00	6010				
			SN	58.	ppm	MDK	04-AUG-00	6010				
			TL	<1.	ppm	MDK	04-AUG-00	6010				
			V	14.	ppm	MDK	04-AUG-00	6010				
			ZN	27130.	ppm	MDK	16-SEP-00	6010				
			L000919-015	14-JUN-00	B72 (0-0.5)	AG	<0.5	ppm	MDK	04-AUG-00	6010	
						AS	<5.	ppm	MDK	04-AUG-00	6010	
						BA	66.	ppm	MDK	04-AUG-00	6010	
BI	<4.	ppm				MDK	04-AUG-00	6010				
CD	3.	ppm				MDK	04-AUG-00	6010				
CN-	<0.04	ppm				DC	21-JUN-00	335.2				
CO	<5.	ppm				MDK	04-AUG-00	6010				
CR	11.*	ppm				MDK	04-AUG-00	6010				
CU	74.*	ppm				MDK	04-AUG-00	6010				
HG	<0.05	ppm				EH	30-JUN-00	7471				
MN	1484.	ppm				MDK	04-AUG-00	6010				
MOIST.	18.	%				MJF	25-JUN-00	GRAV.				
NI	6.	ppm				MDK	04-AUG-00	6010				
PB	42.	ppm				MDK	04-AUG-00	6010				
SB	2.*	ppm				MDK	04-AUG-00	6010				
SE	<0.8	ppm				MDK	04-AUG-00	6010				
SN	<5.	ppm				MDK	04-AUG-00	6010				
TL	<1.	ppm				MDK	04-AUG-00	6010				

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L000919-015	14-JUN-00	B72 (0-0.5)	V	13.	ppm	MDK	04-AUG-00		6010
			ZN	19120.	ppm	MDK	16-SEP-00		6010
L000919-016	14-JUN-00	B111 (0-0.5)	AG	73.	ppm	MDK	04-AUG-00		6010
			AS	412.	ppm	MDK	04-AUG-00		6010
			BA	886.	ppm	MDK	04-AUG-00		6010
			BI	20.	ppm	MDK	04-AUG-00		6010
			CD	545.	ppm	MDK	04-AUG-00		6010
			CN-	2.2	ppm	DC	21-JUN-00	335.2	6010
			CO	383.	ppm	MDK	04-AUG-00		6010
			CR	183.*	ppm	MDK	04-AUG-00		6010
			CU	3785.*	ppm	MDK	04-AUG-00		6010
			HG	3.7	ppm	EH	30-JUN-00	7471	6010
			MIN	24850.	ppm	MDK	16-SEP-00		6010
			MOIST.	13.	%	MJF	25-JUN-00		GRAV.
			NI	288.	ppm	MDK	04-AUG-00		6010
			PB	11970.	ppm	MDK	04-AUG-00		6010
			SB	61.*	ppm	MDK	04-AUG-00		6010
			SE	6.	ppm	MDK	04-AUG-00		6010
			SN	154.	ppm	MDK	04-AUG-00		6010
			TL	<1.	ppm	MDK	04-AUG-00		6010
			V	31.	ppm	MDK	04-AUG-00		6010
			ZN	48330.	ppm	MDK	16-SEP-00		6010
L000919-017	14-JUN-00	B111 (2.2.5)	AG	12.	ppm	MDK	04-AUG-00		6010
			AS	24.	ppm	MDK	04-AUG-00		6010
			BA	207.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	24.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00	335.2	6010
			CO	17.	ppm	MDK	04-AUG-00		6010
			CR	52.*	ppm	MDK	04-AUG-00		6010
			CU	282.*	ppm	MDK	04-AUG-00		6010
			HG	0.47	ppm	EH	30-JUN-00	7471	6010
			MN	6229.	ppm	MDK	04-AUG-00		6010
			MOIST.	20.	%	MJF	25-JUN-00		GRAV.
			NI	34.	ppm	MDK	04-AUG-00		6010
			PB	1490.	ppm	MDK	04-AUG-00		6010
			SB	6.*	ppm	MDK	04-AUG-00		6010

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L000919-017	14-JUN-00	Bill (2-2.5)	SE	<0.8	ppm	MDK	04-AUG-00		6010			
			SN	10.	ppm	MDK	04-AUG-00		6010			
			TL	<1.	ppm	MDK	04-AUG-00		6010			
			V	23.	ppm	MDK	04-AUG-00		6010			
			ZN	12900.	ppm	MDK	16-SEP-00		6010			
			AG	<0.5	ppm	MDK	04-AUG-00		6010			
			AS	10.	ppm	MDK	04-AUG-00		6010			
			BA	384.	ppm	MDK	04-AUG-00		6010			
			BI	<4.	ppm	MDK	04-AUG-00		6010			
			CD	3.	ppm	MDK	04-AUG-00		6010			
L000919-018	14-JUN-00	Bill (5.5)	CN-	<0.04	ppm	DC	21-JUN-00	335.2				
			CO	8.	ppm	MDK	04-AUG-00		6010			
			CR	18.*	ppm	MDK	04-AUG-00		6010			
			CU	32.*	ppm	MDK	04-AUG-00		6010			
			HG	0.26	ppm	EH	30-JUN-00		7471			
			MN	1040.	ppm	MDK	04-AUG-00		6010			
			MOIST.	24.	%	WJF	25-JUN-00		GRAV.			
			NI	13.	ppm	MDK	04-AUG-00		6010			
			PB	70.	ppm	MDK	04-AUG-00		6010			
			SB	2.*	ppm	MDK	04-AUG-00		6010			
			SE	<0.8	ppm	MDK	04-AUG-00		6010			
			SN	5.	ppm	MDK	04-AUG-00		6010			
			TL	2.	ppm	MDK	04-AUG-00		6010			
			V	51.	ppm	MDK	04-AUG-00		6010			
			ZN	2250.	ppm	MDK	04-AUG-00		6010			
			L000919-019	14-JUN-00	Bill (8.5)	AG	2.	ppm	MDK	04-AUG-00		6010
						AS	<5.	ppm	MDK	04-AUG-00		6010
						BA	227.	ppm	MDK	04-AUG-00		6010
BI	<4.	ppm				MDK	04-AUG-00		6010			
CD	<1.	ppm				MDK	04-AUG-00		6010			
CN-	<0.04	ppm				DC	21-JUN-00		335.2			
CO	<5.	ppm				MDK	04-AUG-00		6010			
CR	12.*	ppm				MDK	04-AUG-00		6010			
CU	12.*	ppm				MDK	04-AUG-00		6010			
HG	<0.05	ppm				EH	30-JUN-00		7471			
MN	301.	ppm				MDK	04-AUG-00		6010			
MOIST.	20.	%				WJF	25-JUN-00		GRAV.			

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L000919-019	14-JUN-00	Bill (8.5)	NI	9.	ppm	MDK	04-AUG-00		6010
			PB	13.	ppm	MDK	04-AUG-00		6010
			SB	<0.8*	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.	ppm	MDK	04-AUG-00		6010
			TL	2.	ppm	MDK	04-AUG-00		6010
			V	40.	ppm	MDK	04-AUG-00		6010
			ZN	88.	ppm	MDK	04-AUG-00		6010
			AG	<0.5	ppm	MDK	04-AUG-00		6010
			AS	6.	ppm	MDK	04-AUG-00		6010
			BA	254.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	<1.	ppm	MDK	04-AUG-00		6010
			CN	<0.04	ppm	DC	21-JUN-00		335.2
L000919-020	14-JUN-00	Bill (11.5)	CO	7.	ppm	MDK	04-AUG-00		6010
			CR	14.*	ppm	MDK	04-AUG-00		6010
			CU	11.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00		7471
			MN	354.	ppm	MDK	04-AUG-00		6010
			MOIST.	20.	%	WJF	25-JUN-00		GRAV.
			NI	11.	ppm	MDK	04-AUG-00		6010
			PB	13.	ppm	MDK	04-AUG-00		6010
			SB	1.*	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.	ppm	MDK	04-AUG-00		6010
			TL	2.	ppm	MDK	04-AUG-00		6010
			V	31.	ppm	MDK	04-AUG-00		6010
			ZN	61.	ppm	MDK	04-AUG-00		6010
L000919-021	14-JUN-00	Bill (14.5)	AG	1.	ppm	MDK	04-AUG-00		6010
			AS	6.	ppm	MDK	04-AUG-00		6010
			BA	223.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	<1.	ppm	MDK	04-AUG-00		6010
			CN	<0.04	ppm	DC	21-JUN-00		335.2
			CO	7.	ppm	MDK	04-AUG-00		6010
			CR	12.*	ppm	MDK	04-AUG-00		6010
			CU	18.*	ppm	MDK	04-AUG-00		6010

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L000919-021	14-JUN-00	Bill (14.5)	HG	<0.05	ppm	EH	30-JUN-00		7471			
			MN	430.	ppm	MDK	04-AUG-00		6010			
			MOIST.	22.	%	MJF	25-JUN-00		GRAV.			
			NI	10.	ppm	MDK	04-AUG-00		6010			
			PB	34.	ppm	MDK	04-AUG-00		6010			
			SB	1.*	ppm	MDK	04-AUG-00		6010			
			SE	<0.8	ppm	MDK	04-AUG-00		6010			
			SN	<5.	ppm	MDK	04-AUG-00		6010			
			TL	2.	ppm	MDK	04-AUG-00		6010			
			V	25.	ppm	MDK	04-AUG-00		6010			
			ZN	118.	ppm	MDK	04-AUG-00		6010			
			L000919-022	14-JUN-00	Bill (17.5)	AG	<0.5	ppm	MDK	04-AUG-00		6010
						AS	7.	ppm	MDK	04-AUG-00		6010
						BA	269.	ppm	MDK	04-AUG-00		6010
BI	<4.	ppm				MDK	04-AUG-00		6010			
CD	<1.	ppm				MDK	04-AUG-00		6010			
CN-	<0.04	ppm				DC	21-JUN-00		335.2			
CO	9.	ppm				MDK	04-AUG-00		6010			
CR	16.*	ppm				MDK	04-AUG-00		6010			
CU	15.*	ppm				MDK	04-AUG-00		6010			
HG	<0.05	ppm				EH	30-JUN-00		7471			
MN	439.	ppm				MDK	04-AUG-00		6010			
MOIST.	24.	%				MJF	25-JUN-00		GRAV.			
NI	13.	ppm				MDK	04-AUG-00		6010			
PB	38.	ppm				MDK	04-AUG-00		6010			
SB	2.*	ppm	MDK	04-AUG-00		6010						
SE	<0.8	ppm	MDK	04-AUG-00		6010						
SN	<5.	ppm	MDK	04-AUG-00		6010						
TL	2.	ppm	MDK	04-AUG-00		6010						
V	34.	ppm	MDK	04-AUG-00		6010						
ZN	84.	ppm	MDK	04-AUG-00		6010						
L000919-023	14-JUN-00	Bill (20-20.5)	AG	3.	ppm	MDK	04-AUG-00		6010			
			AS	9.	ppm	MDK	04-AUG-00		6010			
			BA	371.	ppm	MDK	04-AUG-00		6010			
			BI	<4.	ppm	MDK	04-AUG-00		6010			
			CD	<1.	ppm	MDK	04-AUG-00		6010			
			CN-	<0.04	ppm	DC	21-JUN-00		335.2			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000919-023	14-JUN-00	B111 (20-20.5)	CO	9.	ppm	MDK	04-AUG-00		6010			
			CR	18.*	ppm	MDK	04-AUG-00		6010			
			CU	25.*	ppm	MDK	04-AUG-00		6010			
			HG	<0.05	ppm	EH	30-JUN-00		7471			
			MN	649.	ppm	MDK	04-AUG-00		6010			
			MOIST.	24.	%	MJF	25-JUN-00		GRAV.			
			NI	14.	ppm	MDK	04-AUG-00		6010			
			PB	93.	ppm	MDK	04-AUG-00		6010			
			SB	2.*	ppm	MDK	04-AUG-00		6010			
			SE	1.	ppm	MDK	04-AUG-00		6010			
			SN	<5.	ppm	MDK	04-AUG-00		6010			
			TL	2.	ppm	MDK	04-AUG-00		6010			
			V	40.	ppm	MDK	04-AUG-00		6010			
			ZN	150.	ppm	MDK	04-AUG-00		6010			
			L000919-024	14-JUN-00	B74 (0-0.5)	AG	<0.5	ppm	MDK	04-AUG-00		6010
						AS	<5.	ppm	MDK	04-AUG-00		6010
						BA	79.	ppm	MDK	04-AUG-00		6010
						BI	<4.	ppm	MDK	04-AUG-00		6010
						CD	<1.	ppm	MDK	04-AUG-00		6010
						CN-	<0.04	ppm	DC	26-JUN-00		335.2
CO	6.	ppm				MDK	04-AUG-00		6010			
CR	22.*	ppm				MDK	04-AUG-00		6010			
CU	10.*	ppm				MDK	04-AUG-00		6010			
HG	<0.05	ppm				EH	30-JUN-00		7471			
MN	204.	ppm				MDK	04-AUG-00		6010			
MOIST.	17.	%				MJF	25-JUN-00		GRAV.			
NI	16.	ppm				MDK	04-AUG-00		6010			
PB	13.	ppm				MDK	04-AUG-00		6010			
SB	<0.8*	ppm				MDK	04-AUG-00		6010			
SE	<0.8	ppm				MDK	04-AUG-00		6010			
SN	<5.	ppm				MDK	04-AUG-00		6010			
TL	2.	ppm				MDK	04-AUG-00		6010			
V	17.	ppm				MDK	04-AUG-00		6010			
ZN	399.	ppm				MDK	04-AUG-00		6010			
L000919-025	14-JUN-00	B110 (0-0.5)	AG	19.	ppm	MDK	04-AUG-00		6010			
			AS	30.	ppm	MDK	04-AUG-00		6010			
			BA	441.	ppm	MDK	04-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000919-025	14-JUN-00	B110 (0-0.5)	BI	<4.	ppm	MDK	04-AUG-00	6010				
			CD	109.	ppm	MDK	04-AUG-00	6010				
			CN-	<0.04	ppm	DC	26-JUN-00	335.2				
			CO	16.	ppm	MDK	04-AUG-00	6010				
			CR	60.*	ppm	MDK	04-AUG-00	6010				
			CU	443.*	ppm	MDK	04-AUG-00	6010				
			HG	0.24	ppm	BH	30-JUN-00	7471				
			MN	727.	ppm	MDK	04-AUG-00	6010				
			MOIST.	14.	%	MJF	25-JUN-00	GRAV.				
			NI	45.	ppm	MDK	04-AUG-00	6010				
			PB	2150.	ppm	MDK	04-AUG-00	6010				
			SB	7.*	ppm	MDK	04-AUG-00	6010				
			SE	2.	ppm	MDK	04-AUG-00	6010				
			SN	25.	ppm	MDK	04-AUG-00	6010				
			TL	2.	ppm	MDK	04-AUG-00	6010				
			V	20.	ppm	MDK	04-AUG-00	6010				
			ZN	8113.	ppm	MDK	04-AUG-00	6010				
			L000919-026	14-JUN-00	B110 (2-2.5)	AG	2.	ppm	MDK	04-AUG-00	6010	
						AS	5.	ppm	MDK	04-AUG-00	6010	
BA	273.	ppm				MDK	04-AUG-00	6010				
BI	<4.	ppm				MDK	04-AUG-00	6010				
CD	1.	ppm				MDK	04-AUG-00	6010				
CN-	<0.04	ppm				DC	26-JUN-00	335.2				
CO	<5.	ppm				MDK	04-AUG-00	6010				
CR	22.*	ppm				MDK	04-AUG-00	6010				
CU	16.*	ppm				MDK	04-AUG-00	6010				
HG	<0.05	ppm				BH	30-JUN-00	7471				
MN	280.	ppm				MDK	04-AUG-00	6010				
MOIST.	16.	%				MJF	25-JUN-00	GRAV.				
NI	13.	ppm				MDK	04-AUG-00	6010				
PB	25.	ppm				MDK	04-AUG-00	6010				
SB	<0.8*	ppm				MDK	04-AUG-00	6010				
SE	<0.8	ppm				MDK	04-AUG-00	6010				
SN	<5.	ppm				MDK	04-AUG-00	6010				
TL	7.	ppm				MDK	04-AUG-00	6010				
V	25.	ppm				MDK	04-AUG-00	6010				
ZN	147.	ppm	MDK	04-AUG-00	6010							

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-027	14-JUN-00	B110 (5.5)	AG	1.	ppm	MDK	04-AUG-00		6010
			AS	6.	ppm	MDK	04-AUG-00		6010
			BA	226.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	<1.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	26-JUN-00		335.2
			CO	6.	ppm	MDK	04-AUG-00		6010
			CR	13.*	ppm	MDK	04-AUG-00		6010
			CU	9.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00		7471
			MN	372.	ppm	MDK	04-AUG-00		6010
			MOIST.	17.	%	MJF	25-JUN-00		GRAV.
			NI	10.	ppm	MDK	04-AUG-00		6010
			PB	13.	ppm	MDK	04-AUG-00		6010
			SE	<0.8*	ppm	MDK	04-AUG-00		6010
			SN	<0.8	ppm	MDK	04-AUG-00		6010
			TL	<5.	ppm	MDK	04-AUG-00		6010
			V	5.	ppm	MDK	04-AUG-00		6010
			ZN	33.	ppm	MDK	04-AUG-00		6010
				62.	ppm	MDK	04-AUG-00		6010
L000919-028	14-JUN-00	B110 (8.5)	AG	<0.5	ppm	MDK	04-AUG-00		6010
			AS	<5.	ppm	MDK	04-AUG-00		6010
			BA	212.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	2.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	26-JUN-00		335.2
			CO	<5.	ppm	MDK	04-AUG-00		6010
			CR	17.*	ppm	MDK	04-AUG-00		6010
			CU	16.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00		7471
			MN	237.	ppm	MDK	04-AUG-00		6010
			MOIST.	21.	%	MJF	25-JUN-00		GRAV.
			NI	10.	ppm	MDK	04-AUG-00		6010
			PB	32.	ppm	MDK	04-AUG-00		6010
			SE	<0.8*	ppm	MDK	04-AUG-00		6010
			SN	<0.8	ppm	MDK	04-AUG-00		6010
TL	<5.	ppm	MDK	04-AUG-00		6010			
	2.	ppm	MDK	04-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-028	14-JUN-00	B110 (8.5)	V	20.	ppm	MDK	04-AUG-00		6010
			ZN	353.	ppm	MDK	04-AUG-00		6010
L000919-029	14-JUN-00	B110 (11.5)	AG	<0.5	ppm	MDK	04-AUG-00		6010
			AS	9.	ppm	MDK	04-AUG-00		6010
			BA	56.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	<1.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	26-JUN-00	335.2	6010
			CO	7.	ppm	MDK	04-AUG-00		6010
			CR	22.*	ppm	MDK	04-AUG-00		6010
			CU	12.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00	7471	6010
			MN	436.	ppm	MDK	04-AUG-00		6010
			MOIST.	23.	%	MJF	25-JUN-00		GRAV.
			NI	15.	ppm	MDK	04-AUG-00		6010
			PB	11.	ppm	MDK	04-AUG-00		6010
			SB	<0.8*	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.	ppm	MDK	04-AUG-00		6010
			TL	4.	ppm	MDK	04-AUG-00		6010
			V	43.	ppm	MDK	04-AUG-00		6010
			ZN	81.	ppm	MDK	04-AUG-00		6010
L000919-030	14-JUN-00	B110 (14.5)	AG	<0.5	ppm	MDK	04-AUG-00		6010
			AS	11.	ppm	MDK	04-AUG-00		6010
			BA	267.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	<1.	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	26-JUN-00	335.2	6010
			CO	10.	ppm	MDK	04-AUG-00		6010
			CR	18.*	ppm	MDK	04-AUG-00		6010
			CU	11.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00	7471	6010
			MN	1480.	ppm	MDK	04-AUG-00		6010
			MOIST.	22.	%	MJF	25-JUN-00		GRAV.
			NI	15.	ppm	MDK	04-AUG-00		6010
			PB	11.	ppm	MDK	04-AUG-00		6010
			SB	<0.8*	ppm	MDK	04-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
 ANALYTICAL DATA REPORT  
 Encycle/Texas

Technical Services (Project 8201)

Batch No: L000919

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000919-030	14-JUN-00	B110 (14.5)	SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.	ppm	MDK	04-AUG-00		6010
			TL	2.	ppm	MDK	04-AUG-00		6010
			V	37.	ppm	MDK	04-AUG-00		6010
			ZN	57.	ppm	MDK	04-AUG-00		6010
L000919-031	14-JUN-00	B110 (15.5-16)	AG	<0.5	ppm	MDK	04-AUG-00		6010
			AS	<5.	ppm	MDK	04-AUG-00		6010
			BA	240.	ppm	MDK	04-AUG-00		6010
			BI	<4.	ppm	MDK	04-AUG-00		6010
			CD	<1.	ppm	MDK	04-AUG-00		6010
			CN	<0.04	ppm	DC	26-JUN-00		335.2
			CO	<5.	ppm	MDK	04-AUG-00		6010
			CR	16.*	ppm	MDK	04-AUG-00		6010
			CU	5.*	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00		7471
			MN	294.	ppm	MDK	04-AUG-00		6010
			MOIST.	16.	%	MJF	25-JUN-00		GRAV.
			NI	9.	ppm	MDK	04-AUG-00		6010
			PB	7.	ppm	MDK	04-AUG-00		6010
			SB	<0.8*	ppm	MDK	04-AUG-00		6010
SE	<0.8	ppm	MDK	04-AUG-00		6010			
SN	<5.	ppm	MDK	04-AUG-00		6010			
TL	2.	ppm	MDK	04-AUG-00		6010			
V	12.	ppm	MDK	04-AUG-00		6010			
ZN	26.	ppm	MDK	04-AUG-00		6010			

(\*) Quality control data indicates a possible bias. See QC report for details.

Approved  
  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000491

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD		
WG000491-1		Matrix Spike	AG	110	%Recovery	MDK	04-AUG-00	6010			
	AS		95	%Recovery	MDK	04-AUG-00	6010				
	BA		97	%Recovery	MDK	04-AUG-00	6010				
	BI		93	%Recovery	MDK	04-AUG-00	6010				
	CD		100	%Recovery	MDK	04-AUG-00	6010				
	CN-		120	%Recovery	DC	21-JUN-00	335.2				
	CO		91	%Recovery	MDK	04-AUG-00	6010				
	CR		196*	%Recovery	MDK	04-AUG-00	6010				
	CU		152*	%Recovery	MDK	04-AUG-00	6010				
	HG		104	%Recovery	EH	30-JUN-00	7471				
	MN		101	%Recovery	MDK	04-AUG-00	6010				
	NI		111	%Recovery	MDK	04-AUG-00	6010				
	PB		90	%Recovery	MDK	04-AUG-00	6010				
	SB		67*	%Recovery	MDK	04-AUG-00	6010				
	SE		79	%Recovery	MDK	04-AUG-00	6010				
	SN		92	%Recovery	MDK	04-AUG-00	6010				
	TL		83	%Recovery	MDK	04-AUG-00	6010				
	V		99	%Recovery	MDK	04-AUG-00	6010				
	ZN		SR>4SA	%Recovery	MDK	16-AUG-00	6010				
	WG000491-2			Prep Blank	AG	<0.5	ppm	MDK	04-AUG-00	6010	
			AS		<5.0	ppm	MDK	04-AUG-00	6010		
BA		<5.0	ppm		MDK	04-AUG-00	6010				
BI		<4.0	ppm		MDK	04-AUG-00	6010				
CD		<1.0	ppm		MDK	04-AUG-00	6010				
CN-		<0.04	ppm		DC	21-JUN-00	335.2				
CO		<5.0	ppm		MDK	04-AUG-00	6010				
CR		<5.0	ppm		MDK	04-AUG-00	6010				
CU		<5.0	ppm		MDK	04-AUG-00	6010				
HG		<0.05	ppm		EH	30-JUN-00	7471				
MN		<5.0	ppm		MDK	04-AUG-00	6010				
NI		<5.0	ppm		MDK	04-AUG-00	6010				
PB		<5.0	ppm		MDK	04-AUG-00	6010				
SB		<0.8	ppm		MDK	04-AUG-00	6010				
SE		<0.8	ppm		MDK	04-AUG-00	6010				
SN		<5.0	ppm		MDK	04-AUG-00	6010				
TL		2.0	ppm		MDK	04-AUG-00	6010				
V		<5.0	ppm		MDK	04-AUG-00	6010				
ZN		<5.0	ppm		MDK	04-AUG-00	6010				

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000491

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD	
WG000491-3		Lab Control Sample	AG	97	%Recovery	MDK	04-AUG-00	6010	6010	
			AS	94	%Recovery	MDK	04-AUG-00	6010	6010	
			BA	95	%Recovery	MDK	04-AUG-00	6010	6010	
			BI	94	%Recovery	MDK	04-AUG-00	6010	6010	
			CD	92	%Recovery	MDK	04-AUG-00	6010	6010	
			CN-	104	%Recovery	DC	21-JUN-00	335.2	335.2	335.2
			CO	93	%Recovery	MDK	04-AUG-00	6010	6010	
			CR	96	%Recovery	MDK	04-AUG-00	6010	6010	
			CU	102	%Recovery	MDK	04-AUG-00	6010	6010	
			HG	106	%Recovery	EH	30-JUN-00	7471	7471	
			MN	97	%Recovery	MDK	04-AUG-00	6010	6010	
			NI	95	%Recovery	MDK	04-AUG-00	6010	6010	
			PB	93	%Recovery	MDK	04-AUG-00	6010	6010	
			SB	150**	%Recovery	MDK	04-AUG-00	6010	6010	
			SE	80	%Recovery	MDK	04-AUG-00	6010	6010	
			SN	105	%Recovery	MDK	04-AUG-00	6010	6010	
			TL	102	%Recovery	MDK	04-AUG-00	6010	6010	
			V	96	%Recovery	MDK	04-AUG-00	6010	6010	
			ZN	99	%Recovery	MDK	04-AUG-00	6010	6010	
			WG000491-4		Matrix Spike Duplicate	AG	2.2	% RPD	MDK	04-AUG-00
AS	4.1	% RPD				MDK	04-AUG-00	6010	6010	
BA	4.4	% RPD				MDK	04-AUG-00	6010	6010	
BI	<1	% RPD				MDK	04-AUG-00	6010	6010	
CD	2.8	% RPD				MDK	04-AUG-00	6010	6010	
CO	<1	% RPD				MDK	04-AUG-00	6010	6010	
CR	19	% RPD				MDK	04-AUG-00	6010	6010	
CU	3.3	% RPD				MDK	04-AUG-00	6010	6010	
HG	8.4	% RPD				MDK	04-AUG-00	6010	6010	
MN	7.0	% RPD				MDK	30-JUN-00	7471	7471	
NI	6.2	% RPD				MDK	04-AUG-00	6010	6010	
PB	5.2	% RPD				MDK	04-AUG-00	6010	6010	
SB	6.2	% RPD				MDK	04-AUG-00	6010	6010	
SE	4.9	% RPD				MDK	04-AUG-00	6010	6010	
SN	<1	% RPD				MDK	04-AUG-00	6010	6010	
TL	1.2	% RPD				MDK	04-AUG-00	6010	6010	
V	1.6	% RPD				MDK	04-AUG-00	6010	6010	
ZN	3.7	% RPD				MDK	16-AUG-00	6010	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000491

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000491-5		Reporting Limit							
			AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.8	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010
WG000491-6		Matrix Spike							
			AG	107	%Recovery	MDK	04-AUG-00		6010
			AS	91	%Recovery	MDK	04-AUG-00		6010
			BA	96	%Recovery	MDK	04-AUG-00		6010
			BI	95	%Recovery	MDK	04-AUG-00		6010
			CD	111	%Recovery	MDK	04-AUG-00		6010
			CN-	112	%Recovery	DC	21-JUN-00		335.2
			CO	92	%Recovery	MDK	04-AUG-00		6010
			CR	159*	%Recovery	MDK	04-AUG-00		6010
			CU	149*	%Recovery	MDK	04-AUG-00		6010
			HG	92	%Recovery	EH	30-JUN-00		7471
			MN	SR>4SA	%Recovery	MDK	04-AUG-00		6010
			NI	104	%Recovery	MDK	04-AUG-00		6010
			PB	SR>4SA	%Recovery	MDK	04-AUG-00		6010
			SB	64*	%Recovery	MDK	04-AUG-00		6010
			SE	78	%Recovery	MDK	04-AUG-00		6010
			SN	94	%Recovery	MDK	04-AUG-00		6010
			TL	83	%Recovery	MDK	04-AUG-00		6010
			V	101	%Recovery	MDK	04-AUG-00		6010
			ZN	SR>4SA	%Recovery	MDK	04-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000491

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000491-7		Prep Blank	AG	<0.5	ppm	MDK	04-AUG-00		6010
			AS	<5.0	ppm	MDK	04-AUG-00		6010
			BA	<5.0	ppm	MDK	04-AUG-00		6010
			BI	<4.0	ppm	MDK	04-AUG-00		6010
			CD	<1.0	ppm	MDK	04-AUG-00		6010
			CN-	<0.04	ppm	DC	21-JUN-00		335.2
			CO	<5.0	ppm	MDK	04-AUG-00		6010
			CR	<5.0	ppm	MDK	04-AUG-00		6010
			CU	<5.0	ppm	MDK	04-AUG-00		6010
			HG	<0.05	ppm	EH	30-JUN-00		7471
			MN	<5.0	ppm	MDK	04-AUG-00		6010
			NI	<5.0	ppm	MDK	04-AUG-00		6010
			PB	<5.0	ppm	MDK	04-AUG-00		6010
			SB	<0.8	ppm	MDK	04-AUG-00		6010
			SE	<0.8	ppm	MDK	04-AUG-00		6010
			SN	<5.0	ppm	MDK	04-AUG-00		6010
			TL	1.1	ppm	MDK	04-AUG-00		6010
			V	<5.0	ppm	MDK	04-AUG-00		6010
			ZN	<5.0	ppm	MDK	04-AUG-00		6010
			WG000491-8		Lab Control Sample	AG	104	%Recovery	MDK
AS	100	%Recovery				MDK	04-AUG-00		6010
BA	100	%Recovery				MDK	04-AUG-00		6010
BI	95	%Recovery				MDK	04-AUG-00		6010
CD	96	%Recovery				MDK	04-AUG-00		6010
CN-	112	%Recovery				DC	21-JUN-00		335.2
CO	99	%Recovery				MDK	04-AUG-00		6010
CR	102	%Recovery				MDK	04-AUG-00		6010
CU	110	%Recovery				MDK	04-AUG-00		6010
HG	98	%Recovery				EH	30-JUN-00		7471
MN	108	%Recovery				MDK	04-AUG-00		6010
NI	100	%Recovery				MDK	04-AUG-00		6010
PB	98	%Recovery				MDK	04-AUG-00		6010
SB	163**	%Recovery				MDK	04-AUG-00		6010
SE	87	%Recovery				MDK	04-AUG-00		6010
SN	111	%Recovery				MDK	04-AUG-00		6010
TL	99	%Recovery				MDK	04-AUG-00		6010
V	104	%Recovery				MDK	04-AUG-00		6010
ZN	100	%Recovery				MDK	04-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Industrial Hygiene (OSHA/MSHA) (Project 8212)

Batch No: WG000491

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000491-9		Matrix Spike Duplicate	AG	<1	% RPD	MDK	04-AUG-00	6010	
			AS	1	% RPD	MDK	04-AUG-00	6010	
			BA	<1	% RPD	MDK	04-AUG-00	6010	
			BI	<1	% RPD	MDK	04-AUG-00	6010	
			CD	2.5	% RPD	MDK	04-AUG-00	6010	
			CO	2.4	% RPD	MDK	04-AUG-00	6010	
			CR	<1	% RPD	MDK	04-AUG-00	6010	
			CU	<1	% RPD	MDK	04-AUG-00	6010	
			MN	5.9	% RPD	MDK	04-AUG-00	6010	
			NI	<1	% RPD	MDK	04-AUG-00	6010	
			PB	4.3	% RPD	MDK	04-AUG-00	6010	
			SB	4.3	% RPD	MDK	04-AUG-00	6010	
			SE	1.6	% RPD	MDK	04-AUG-00	6010	
			SN	1.4	% RPD	MDK	04-AUG-00	6010	
			TL	<1	% RPD	MDK	04-AUG-00	6010	
			V	<1	% RPD	MDK	04-AUG-00	6010	
			ZN	2.9	% RPD	MDK	04-AUG-00	6010	
WG000491-11		Duplicate	CN-MOIST.	<1	% RPD	DC	27-JUN-00	335.2	
			MOIST.	4.7	% RPD	MJF	25-JUN-00	GRAV.	
WG000491-12		Duplicate	CN-MOIST.	<1	% RPD	DC	27-JUN-00	335.2	
			MOIST.	<1	% RPD	MJF	25-JUN-00	GRAV.	

\* = Spikes outside acceptance limits due to matrix interference.  
 \*\* = LCS for Sb is within ERA (244) 95% confidence interval.

AKH for VPK  
 Approved  
 [Signature]  
 Reviewed

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000949

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000949-001	19-JUN-00	B43 (0-0.5)	AG	2.	ppm	MDK	02-AUG-00		6010
			AS	<5.	ppm	MDK	02-AUG-00		6010
			BA	449.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	6.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	7.	ppm	MDK	02-AUG-00		6010
			CR	16.	ppm	MDK	02-AUG-00		6010
			CU	80.	ppm	MDK	02-AUG-00		6010
			HG	0.15	ppm	EH	05-JUL-00		7471
			MN	155.	ppm	MDK	02-AUG-00		6010
			MOIST.	14.	%	MF	28-JUN-00		GRAV.
			NI	27.	ppm	MDK	02-AUG-00		6010
			PB	97.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	1.	ppm	MDK	02-AUG-00		6010
			SN	5.	ppm	MDK	02-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	19.	ppm	MDK	02-AUG-00		6010
			ZN	354.	ppm	MDK	02-AUG-00		6010
			L000949-002	19-JUN-00	B41 (0-0.5)	AG	6.	ppm	MDK
AS	23.	ppm				MDK	02-AUG-00		6010
BA	245.	ppm				MDK	02-AUG-00		6010
BI	<4.	ppm				MDK	02-AUG-00		6010
CD	72.	ppm				MDK	02-AUG-00		6010
CN-	<0.04	ppm				DC	28-JUN-00		335.2
CO	9.	ppm				MDK	02-AUG-00		6010
CR	75.	ppm				MDK	02-AUG-00		6010
CU	138.	ppm				MDK	02-AUG-00		6010
HG	1.4	ppm				EH	05-JUL-00		7471
MN	504.	ppm				MDK	02-AUG-00		6010
MOIST.	7.7	%				MF	28-JUN-00		GRAV.
NI	32.	ppm				MDK	02-AUG-00		6010
PB	425.	ppm				MDK	02-AUG-00		6010
SB	7.	ppm				MDK	02-AUG-00		6010
SE	1.	ppm				MDK	02-AUG-00		6010
SN	26.	ppm				MDK	02-AUG-00		6010
TL	<1.	ppm				MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000949

LAR NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000949-002	19-JUN-00	B41 (0-0.5)	V	18.	ppm	MDK	02-AUG-00		6010
			ZN	8745.	ppm	MDK	02-AUG-00		6010
L000949-003	19-JUN-00	B42 (0-0.5)	AG	13.	ppm	MDK	02-AUG-00		6010
			AS	129.	ppm	MDK	02-AUG-00		6010
			BA	341.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	93.	ppm	MDK	02-AUG-00		6010
			CN-	0.07	ppm	DC	28-JUN-00		335.2
			CO	11.	ppm	MDK	02-AUG-00		6010
			CR	40.	ppm	MDK	02-AUG-00		6010
			CU	433.	ppm	MDK	02-AUG-00		6010
			HG	1.9	ppm	EH	05-JUL-00		7471
			MN	933.	ppm	MDK	02-AUG-00		6010
			MOIST.	9.5	%	MF	28-JUN-00		GRAV.
			NI	21.	ppm	MDK	02-AUG-00		6010
			PB	1730.	ppm	MDK	02-AUG-00		6010
			SB	38.	ppm	MDK	02-AUG-00		6010
			SE	2.	ppm	MDK	02-AUG-00		6010
			SN	156.	ppm	MDK	02-AUG-00		6010
TL	<1.	ppm	MDK	02-AUG-00		6010			
V	15.	ppm	MDK	02-AUG-00		6010			
ZN	15580.	ppm	MDK	15-AUG-00		6010			
L000949-004	19-JUN-00	B59 (0-0.5)	AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	5.	ppm	MDK	02-AUG-00		6010
			BA	221.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	3.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	11.	ppm	MDK	02-AUG-00		6010
			CR	18.	ppm	MDK	02-AUG-00		6010
			CU	12.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	309.	ppm	MDK	02-AUG-00		6010
			MOIST.	15.	%	MF	28-JUN-00		GRAV.
			NI	40.	ppm	MDK	02-AUG-00		6010
			PB	22.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L000949

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000949-004	19-JUN-00	B59 (0-0.5)	SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
			V	16.	ppm	MDK	02-AUG-00		6010
			ZN	577.	ppm	MDK	02-AUG-00		6010
			AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	5.	ppm	MDK	02-AUG-00		6010
L000949-005	19-JUN-00	B58 (0-0.5)	BA	198.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	<1.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	7.	ppm	MDK	02-AUG-00		6010
			CR	17.	ppm	MDK	02-AUG-00		6010
			CU	9.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	254.	ppm	MDK	02-AUG-00		6010
			MOIST.	19.	%	MF	28-JUN-00		GRAV.
			NI	12.	ppm	MDK	02-AUG-00		6010
			PB	9.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
SN	<5.	ppm	MDK	02-AUG-00		6010			
TL	<1.	ppm	MDK	02-AUG-00		6010			
V	20.	ppm	MDK	02-AUG-00		6010			
ZN	55.	ppm	MDK	02-AUG-00		6010			
L000949-006	19-JUN-00	B57 (0-0.5)	AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	6.	ppm	MDK	02-AUG-00		6010
			BA	210.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	<1.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	6.	ppm	MDK	02-AUG-00		6010
			CR	11.	ppm	MDK	02-AUG-00		6010
			CU	22.	ppm	MDK	02-AUG-00		6010
			HG	0.052	ppm	EH	05-JUL-00		7471
			MN	318.	ppm	MDK	02-AUG-00		6010
			MOIST.	16.	%	MF	28-JUN-00		GRAV.

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000949

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000949-006	19-JUN-00	B57 (0-0.5)	NI	23.	ppm	MDK	02-AUG-00		6010
			PB	15.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
			V	21.	ppm	MDK	02-AUG-00		6010
			ZN	56.	ppm	MDK	02-AUG-00		6010
			AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	10.	ppm	MDK	02-AUG-00		6010
			BA	244.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	2.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
L000949-007	19-JUN-00	B60 (0-0.5)	CO	9.	ppm	MDK	02-AUG-00		6010
			CR	18.	ppm	MDK	02-AUG-00		6010
			CU	74.	ppm	MDK	02-AUG-00		6010
			HG	0.11	ppm	EH	05-JUL-00		7471
			MN	464.	ppm	MDK	02-AUG-00		6010
			MOIST.	22.	%	MF	28-JUN-00		GRAV.
			NI	14.	ppm	MDK	02-AUG-00		6010
			PB	27.	ppm	MDK	02-AUG-00		6010
			SB	1.	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	7.	ppm	MDK	02-AUG-00		6010
			V	35.	ppm	MDK	02-AUG-00		6010
			ZN	407.	ppm	MDK	02-AUG-00		6010
L000949-008	19-JUN-00	B70 (0-0.5)	AG	<0.5	ppm	MDK	02-AUG-00		6010
			AS	<5.	ppm	MDK	02-AUG-00		6010
			BA	131.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	875.	ppm	MDK	02-AUG-00		6010
			CN-	0.11	ppm	DC	28-JUN-00		335.2
			CO	8.	ppm	MDK	02-AUG-00		6010
			CR	16.	ppm	MDK	02-AUG-00		6010
			CU	13.	ppm	MDK	02-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000949

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000949-008	19-JUN-00	B70 (0-0.5)	HG	<0.05	ppm	EH	05-JUL-00	7471				
			MN	545.	ppm	MDK	02-AUG-00	6010				
			MOIST.	21.	%	MF	28-JUN-00	GRAV.				
			NI	11.	ppm	MDK	02-AUG-00	6010				
			PB	10.	ppm	MDK	02-AUG-00	6010				
			SB	<0.8	ppm	MDK	02-AUG-00	6010				
			SE	<0.8	ppm	MDK	02-AUG-00	6010				
			SN	<5.	ppm	MDK	02-AUG-00	6010				
			TL	5.	ppm	MDK	02-AUG-00	6010				
			V	17.	ppm	MDK	02-AUG-00	6010				
			ZN	6289.	ppm	MDK	02-AUG-00	6010				
			L000949-009	19-JUN-00	DUPLICATE 15 (0-0.5)	AG	12.	ppm	MDK	02-AUG-00	6010	
						AS	61.	ppm	MDK	02-AUG-00	6010	
						BA	149.	ppm	MDK	02-AUG-00	6010	
						BI	<4.	ppm	MDK	02-AUG-00	6010	
						CD	89.	ppm	MDK	02-AUG-00	6010	
CN-	0.06	ppm				DC	28-JUN-00	335.2				
CO	<5.	ppm				MDK	02-AUG-00	6010				
CR	19.	ppm				MDK	02-AUG-00	6010				
CU	181.	ppm				MDK	02-AUG-00	6010				
HG	2.7	ppm				EH	05-JUL-00	7471				
MN	637.	ppm				MDK	02-AUG-00	6010				
MOIST.	7.0	%				MF	28-JUN-00	GRAV.				
NI	12.	ppm				MDK	02-AUG-00	6010				
PB	921.	ppm				MDK	02-AUG-00	6010				
SB	40.	ppm				MDK	02-AUG-00	6010				
SE	<0.8	ppm				MDK	02-AUG-00	6010				
SN	81.	ppm	MDK	02-AUG-00	6010							
TL	<1.	ppm	MDK	02-AUG-00	6010							
V	11.	ppm	MDK	02-AUG-00	6010							
ZN	9184.	ppm	MDK	02-AUG-00	6010							
L000949-010	19-JUN-00	DUPLICATE 16 (0-0.5)	AG	1.	ppm	MDK	02-AUG-00	6010				
			AS	<5.	ppm	MDK	02-AUG-00	6010				
			BA	444.	ppm	MDK	02-AUG-00	6010				
			BI	<4.	ppm	MDK	02-AUG-00	6010				
			CD	5.	ppm	MDK	02-AUG-00	6010				
			CN-	<0.04	ppm	DC	28-JUN-00	335.2				

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000949

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000949-010	19-JUN-00	DUPLICATE 16 (0-0.5)	CO	5.	ppm	MDK	02-AUG-00		6010
			CR	23.	ppm	MDK	02-AUG-00		6010
			CU	54.	ppm	MDK	02-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	203.	ppm	MDK	02-AUG-00		6010
			MOIST.	13.	%	MF	28-JUN-00		GRAV.
			NI	14.	ppm	MDK	02-AUG-00		6010
			PB	32.	ppm	MDK	02-AUG-00		6010
			SB	<0.8	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	<5.	ppm	MDK	02-AUG-00		6010
			TL	2.	ppm	MDK	02-AUG-00		6010
			V	24.	ppm	MDK	02-AUG-00		6010
			ZN	320.	ppm	MDK	02-AUG-00		6010
L000949-011	19-JUN-00	DUPLICATE 17 (0-0.5)	AG	6.	ppm	MDK	02-AUG-00		6010
			AS	36.	ppm	MDK	02-AUG-00		6010
			BA	245.	ppm	MDK	02-AUG-00		6010
			BI	<4.	ppm	MDK	02-AUG-00		6010
			CD	120.	ppm	MDK	02-AUG-00		6010
			CN-	<0.04	ppm	DC	28-JUN-00		335.2
			CO	11.	ppm	MDK	02-AUG-00		6010
			CR	73.	ppm	MDK	02-AUG-00		6010
			CU	208.	ppm	MDK	02-AUG-00		6010
			HG	0.22	ppm	EH	05-JUL-00		7471
			MN	576.	ppm	MDK	02-AUG-00		6010
			MOIST.	7.5	%	MF	28-JUN-00		GRAV.
			NI	29.	ppm	MDK	02-AUG-00		6010
			PB	492.	ppm	MDK	02-AUG-00		6010
			SB	11.	ppm	MDK	02-AUG-00		6010
			SE	<0.8	ppm	MDK	02-AUG-00		6010
			SN	35.	ppm	MDK	02-AUG-00		6010
			TL	<1.	ppm	MDK	02-AUG-00		6010
			V	30.	ppm	MDK	02-AUG-00		6010
			ZN	10610.	ppm	MDK	15-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

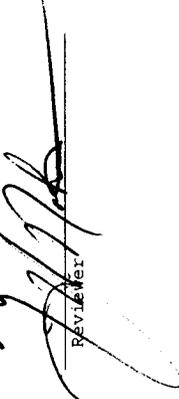
Encycle/Texas

Technical Services (Project 8201)

Batch No: I000949

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
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ANALYST

  
REVIEWER

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000664

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000664-1		Matrix Spike	AG	110	%Recovery	MDK	02-AUG-00	6010	
			AS	93	%Recovery	MDK	02-AUG-00	6010	
			BA	96	%Recovery	MDK	02-AUG-00	6010	
			BI	98	%Recovery	MDK	02-AUG-00	6010	
			CD	92	%Recovery	MDK	02-AUG-00	6010	
			CN-	86	%Recovery	DC	28-JUN-00	335.2	
			CO	94	%Recovery	MDK	02-AUG-00	6010	
			CR	117	%Recovery	MDK	02-AUG-00	6010	
			CU	117	%Recovery	MDK	02-AUG-00	6010	
			HG	95	%Recovery	EH	05-JUL-00	7471	
			MN	106	%Recovery	MDK	02-AUG-00	6010	
			NI	101	%Recovery	MDK	02-AUG-00	6010	
			PB	95	%Recovery	MDK	02-AUG-00	6010	
			SB	54	%Recovery	MDK	02-AUG-00	6010	
			SE	76	%Recovery	MDK	02-AUG-00	6010	
			SN	98	%Recovery	MDK	02-AUG-00	6010	
			TL	87	%Recovery	MDK	02-AUG-00	6010	
			V	105	%Recovery	MDK	02-AUG-00	6010	
			ZN	134	%Recovery	MDK	02-AUG-00	6010	
	WG000664-2		Prep Blank	AG	<0.50	ppm	MDK	02-AUG-00	6010
			AS	<5.0	ppm	MDK	02-AUG-00	6010	
			BA	<5.0	ppm	MDK	02-AUG-00	6010	
			BI	<4.0	ppm	MDK	02-AUG-00	6010	
			CD	<1.0	ppm	MDK	02-AUG-00	6010	
			CN-	<0.04	ppm	DC	28-JUN-00	335.2	
			CO	<5.0	ppm	MDK	02-AUG-00	6010	
			CR	<5.0	ppm	MDK	02-AUG-00	6010	
			CU	<5.0	ppm	MDK	02-AUG-00	6010	
			HG	<0.05	ppm	EH	05-JUL-00	7471	
			MN	<5.0	ppm	MDK	02-AUG-00	6010	
			NI	<5.0	ppm	MDK	02-AUG-00	6010	
			PB	<5.0	ppm	MDK	02-AUG-00	6010	
			SB	<0.80	ppm	MDK	02-AUG-00	6010	
			SE	<0.80	ppm	MDK	02-AUG-00	6010	
			SN	<5.0	ppm	MDK	02-AUG-00	6010	
			TL	<1.0	ppm	MDK	02-AUG-00	6010	
			V	<5.0	ppm	MDK	02-AUG-00	6010	
			ZN	<5.0	ppm	MDK	02-AUG-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000664

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000664-3		Lab Control Sample	AG	100	%Recovery	MDK	02-AUG-00	6010	
			AS	99	%Recovery	MDK	02-AUG-00	6010	
			BA	100	%Recovery	MDK	02-AUG-00	6010	
			BI	98	%Recovery	MDK	02-AUG-00	6010	
			CD	98	%Recovery	MDK	02-AUG-00	6010	
			CN-	90	%Recovery	DC	28-JUN-00	335.2	
			CO	98	%Recovery	MDK	02-AUG-00	6010	
			CR	98	%Recovery	MDK	02-AUG-00	6010	
			CU	107	%Recovery	MDK	02-AUG-00	6010	
			HG	110	%Recovery	EH	05-JUL-00	7471	
			MN	103	%Recovery	MDK	02-AUG-00	6010	
			NI	100	%Recovery	MDK	02-AUG-00	6010	
			PB	96	%Recovery	MDK	02-AUG-00	6010	
			SB	133	%Recovery	MDK	02-AUG-00	6010	
			SE	81	%Recovery	MDK	02-AUG-00	6010	
			SN	103	%Recovery	MDK	02-AUG-00	6010	
			TL	101	%Recovery	MDK	02-AUG-00	6010	
			V	108	%Recovery	MDK	02-AUG-00	6010	
			ZN	97	%Recovery	MDK	02-AUG-00	6010	
WG000664-4		Matrix Spike Duplicate	AG	<1	% RPD	MDK	02-AUG-00	6010	
			AS	<1	% RPD	MDK	02-AUG-00	6010	
			BA	1.5	% RPD	MDK	02-AUG-00	6010	
			BI	2.	% RPD	MDK	02-AUG-00	6010	
			CD	<1	% RPD	MDK	02-AUG-00	6010	
			CO	2	% RPD	MDK	02-AUG-00	6010	
			CR	1.7	% RPD	MDK	02-AUG-00	6010	
			CU	3.6	% RPD	MDK	02-AUG-00	6010	
			HG	17	% RPD	EH	05-JUL-00	7471	
			MN	<1	% RPD	MDK	02-AUG-00	6010	
			NI	2.4	% RPD	MDK	02-AUG-00	6010	
			PB	<1	% RPD	MDK	02-AUG-00	6010	
			SB	<1	% RPD	MDK	02-AUG-00	6010	
			SE	<1	% RPD	MDK	02-AUG-00	6010	
			SN	3.6	% RPD	MDK	02-AUG-00	6010	
			TL	1.4	% RPD	MDK	02-AUG-00	6010	
			V	3.1	% RPD	MDK	02-AUG-00	6010	
			ZN	17	% RPD	MDK	02-AUG-00	6010	

ASARCO TECHNICAL SERVICES CENTER

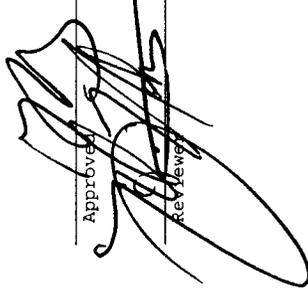
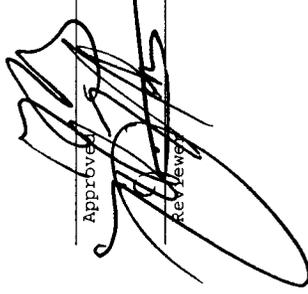
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000664

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000664-5		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010
WG000664-6		Duplicate	CN-	+/-PRDL	% RPD	DC	28-JUN-00		335.2
			MOIST.	6.9	% RPD	MF	28-JUN-00		GRAV.

Approved:   
 Reviewer: 



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 1 of 3

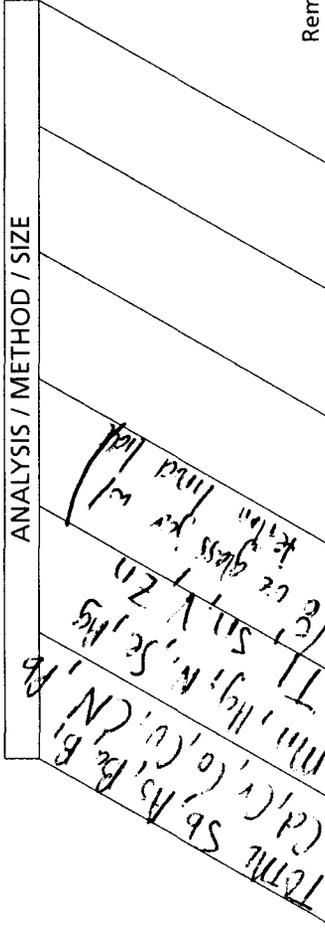
Project Number/Name CC0006420001

Project Location Litchfield, (expansion), VT

Laboratory ASRACO, South Lake City, VT

Project Manager Ken Brounax

Sampler(s)/Affiliation BH / ARCADIS



Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B71 (0-6.5)	S	6/14/00 850			1
B71 (2-7.5)	S	852		HOLD	1
B71 (5.5)	S	855		HOLD	1
B71 (8.5)	S	905		HOLD	1
B71 (11.5)	S	907		HOLD	1
B71 (14.5)	S	915		HOLD	1
B71 (17.5)	S	930		HOLD	1
B71 (20.5)	S	915		HOLD	1
B71 (22.5-23.0)	S	950		HOLD	1
FIELD POINT	L	930			1
EQUIPMENT - 7	L	1300			1
EQUIPMENT - 7 (cont)	S				1
EQUIPMENT - 8	S	1600			1
DUR UNIT E (cont)	S	V			1

Sample Matrix: L = Liquid; S = Solid; A = Air

Total No. of Bottles/Containers 14

Relinquished by: Ken Brounax Organization: ARCADIS Date: 6/14/00 Time: 1605 Seal Intact? Yes

Received by: Ken Brounax Organization: ASRACO Date: 6/15/00 Time: \_\_\_\_\_ Seal Intact? N/A

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See Table Cont in ICFI WORK PLAN QUANTITY ASSURANCE PLAN FOR TEST METHODS - PROVIDED

Analyze 6-6.5 depth soil samples for all parameters, hold deeper samples until notified by ARCADIS

RESULTS to Ken Brounax - 361-883-1353

Delivery Method:  In Person  Common Carrier FEDEX  Lab Courier  Other \_\_\_\_\_

SPECIFY

Project Number/Name: C006242661  
 Project Location: Drake Cup and TX  
 Laboratory: ASARC, Salt Lake City, UT  
 Project Manager: Ken Burdick  
 Sampler(s)/Affiliation: BH / ARCADIS

ANALYSIS / METHOD / SIZE  
 (Cl, Cr, Fe, Cu, Ni, Pb, Zn)  
 100% glass per  
 ASTM 1545  
 100% glass per  
 ASTM 1545

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B772 (0-0.5)	S	10/11/00 1020			1
B772 (2-2.5)		1022		Hold	1
B772 (5.5)		1025		Hold	1
B772 (8.5)		1030		Hold	1
B772 (11.5)		1033		Hold	1
B772 (14.5)		1045		Hold	1
B772 (17-17.5)		1100		Hold	1
B1111 (0-0.5)		1134			1
B1111 (2-2.5)		1136			1
B1111 (5.5)		1145			1
B1111 (8.5)		1149			1
B1111 (11.5)		1151			1
B1111 (14.5)		1205			1
B1111 (17.5)		1220			1
B1111 (20-20.5)		1240			1
Total No. of Bottles/Containers					15

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: Ken Burdick Organization: ARCADIS Date: 6/14/00 Time: 10:25 Seal Intact? Yes

Received by: Ken Burdick Organization: ASARC Date: 6/15/00 Time: 10:00 Seal Intact? Yes

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See Page 1 / Run All Parameters on All Depths



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 2 of 3

Project Number/Name CC000017001  
 Project Location ENVIROLE Camp 100th TX  
 Laboratory AVIAC Safford City, VT  
 Project Manager Ken Franklin  
 Sampler(s)/Affiliation BH / AVIAC

ANALYSIS / METHOD / SIZE  
 TOTAL  
 (Cd, Cr, Co, Cu, Ni, Pb, Se, Hg, Mn, Zn, V, Fe)  
 by glass jar  
 w/ tetra lead lid

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B74 (0-6.5)	S	6/11/00 1445			1
B74 (2-7.5)	S	1447			1
B74 (5.5)	S	1450		HOLD	1
B74 (8.5)	S	1455		HOLD	1
B74 (11.5)	S	1455		HOLD	1
B74 (14.5)	S	1501		HOLD	1
B74 17.5	S	1501		HOLD	1
B74 20.5-21	S	1535		HOLD	1
B110 0-0.5	S	1613			1
B110 2-2.5	S	1615			1
B110 5.5	S	1620			1
B110 8.5	S	1630			1
B110 11.5	S	1635			1
B110 14.5	S	1640			1
B110 15.5-16	S	1643			1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Total No. of Bottles/Containers: 15

Relinquished by: Paula Williams Organization: ARCADIS Date: 6/14/00 Time: 15:05  
 Received by: Ken Franklin Organization: AVIAC Date: 6/15/00 Time: 15:00

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Special Instructions/Remarks: See page 1  
\* RUN ALL PARAMETERS ON ALL DEPTH OF B110

Delivery Method:  In Person  Common Carrier FEDEX  Lab Courier  Other \_\_\_\_\_











ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001028

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD																																																						
L001028-001	19-JUN-00	B-43 (2-2.5)	AG	1.	ppm	MDK	03-AUG-00	6010																																																						
			CR	44.*	ppm	MDK	03-AUG-00	6010																																																						
			CU	66.	ppm	MDK	03-AUG-00	6010																																																						
			HG	0.09	ppm	EH	17-JUL-00	7471																																																						
			MOIST.	13.	%	MJF	15-JUL-00	GRAV.																																																						
			NI	17.	ppm	MDK	03-AUG-00	6010																																																						
			SE	1.	ppm	MDK	03-AUG-00	6010																																																						
			TL	2.	ppm	MDK	03-AUG-00	6010																																																						
			ZN	2260.	ppm	MDK	03-AUG-00	6010																																																						
			ZN	<0.5	ppm	MDK	03-AUG-00	6010																																																						
L001028-002	19-JUN-00	B-43 (5.5)	AG	14.*	ppm	MDK	03-AUG-00	6010																																																						
			CR	7.	ppm	MDK	03-AUG-00	6010																																																						
			CU	<0.05	ppm	EH	17-JUL-00	7471																																																						
			HG	17.	ppm	MJF	15-JUL-00	GRAV.																																																						
			MOIST.	<0.8	%	MDK	03-AUG-00	6010																																																						
			SE	1.	ppm	MDK	03-AUG-00	6010																																																						
			TL	78.	ppm	MDK	03-AUG-00	6010																																																						
			ZN	28.	ppm	MDK	03-AUG-00	6010																																																						
			ZN	21.	ppm	MDK	03-AUG-00	6010																																																						
			ZN	16.	ppm	MDK	03-AUG-00	6010																																																						
L001028-003	19-JUN-00	B-43 (8.5)	AG	15.	ppm	MDK	03-AUG-00	6010																																																						
			AS	<0.5	ppm	MDK	03-AUG-00	6010																																																						
			CD	2.	ppm	MDK	03-AUG-00	6010																																																						
			CO	<5.	ppm	MDK	03-AUG-00	6010																																																						
			CR	18*	ppm	MDK	03-AUG-00	6010																																																						
			CU	6.	ppm	MDK	03-AUG-00	6010																																																						
			HG	<0.05	ppm	EH	17-JUL-00	7471																																																						
			MN	190.	ppm	MDK	03-AUG-00	6010																																																						
			MOIST.	15.	%	MJF	15-JUL-00	GRAV.																																																						
			NI	10.	ppm	MDK	03-AUG-00	6010																																																						
L001028-004	19-JUN-00	B-43 (11.5)	PB	12.	ppm	MDK	03-AUG-00	6010																																																						
			PB	1.*	ppm	MDK	03-AUG-00	6010																																																						
			L001028-005	19-JUN-00	B-43 (14.5)	Zn	21.	ppm	MDK	03-AUG-00	6010																																																			
												L001028-006	19-JUN-00	B-43 (17-17.5)	Zn	15.	ppm	MDK	03-AUG-00	6010																																										
																					L001028-007	19-JUN-00	B-41 (2-2.5)	AG	<0.5	ppm	MDK	03-AUG-00	6010																																	
																														AS	<5.	ppm	MDK	03-AUG-00	6010																											
																																				CD	2.	ppm	MDK	03-AUG-00	6010																					
																																										CO	<5.	ppm	MDK	03-AUG-00	6010															
																																																CR	18*	ppm	MDK	03-AUG-00	6010									
																																																						CU	6.	ppm	MDK	03-AUG-00	6010			
HG	<0.05	ppm																																																										EH	17-JUL-00	7471
			MOIST.	15.	%	MJF	15-JUL-00	GRAV.																																																						
									NI	10.	ppm	MDK	03-AUG-00	6010																																																
															PB	12.	ppm	MDK	03-AUG-00	6010																																										
																					SB	1.*	ppm	MDK	03-AUG-00	6010																																				

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001028

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001028-014	19-JUN-00	B-42 (5.5)	MOIST.	18.	%	MJF	15-JUL-00	GRAV.
			SB	1.*	ppm	MDK	03-AUG-00	6010
			ZN	52.	ppm	MDK	03-AUG-00	6010
L001028-015	19-JUN-00	B-42 (8.5)	CR	16.*	ppm	MDK	03-AUG-00	6010
			SB	2.*	ppm	MDK	03-AUG-00	6010
			ZN	106.	ppm	MDK	03-AUG-00	6010
L001028-016	19-JUN-00	B-42 (11.5)	CR	7.*	ppm	MDK	03-AUG-00	6010
			SB	2.*	ppm	MDK	03-AUG-00	6010
			ZN	21.	ppm	MDK	03-AUG-00	6010
L001028-017	19-JUN-00	B-42 (14.5)	SB	<0.8*	ppm	MDK	03-AUG-00	6010
			ZN	10.	ppm	MDK	03-AUG-00	6010
L001028-018	19-JUN-00	B-42 (15.5-16)	ZN	14.	ppm	MDK	03-AUG-00	6010
L001028-019	19-JUN-00	B-59 (2-2.5)	CO	6.	ppm	MDK	03-AUG-00	6010
			CR	11.*	ppm	MDK	03-AUG-00	6010
			NI	10.	ppm	MDK	03-AUG-00	6010
			ZN	48.	ppm	MDK	03-AUG-00	6010
L001028-020	19-JUN-00	B-59 (5.5)	ZN	65.	ppm	MDK	03-AUG-00	6010
L001028-021	19-JUN-00	B-59 (8.5)	ZN	33.	ppm	MDK	03-AUG-00	6010
L001028-022	19-JUN-00	B-59 (11.5)	ZN	26.	ppm	MDK	03-AUG-00	6010
L001028-023	19-JUN-00	B-59 (14.5)	ZN	18.	ppm	MDK	03-AUG-00	6010
L001028-024	19-JUN-00	B-59 (15.5-16)	ZN	10.	ppm	MDK	03-AUG-00	6010
L001028-025	19-JUN-00	B-58 (2-2.5)	CR	17.*	ppm	MDK	03-AUG-00	6010
			ZN	46.	ppm	MDK	03-AUG-00	6010
L001028-026	19-JUN-00	B-58 (5.5)	CR	12.*	ppm	MDK	03-AUG-00	6010
			ZN	34.	ppm	MDK	03-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001028

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001028-027	19-JUN-00	B-58 (8.5)	ZN	13.	ppm	MDK	03-AUG-00	6010
L001028-028	19-JUN-00	B-58 (11.5)	ZN	13.	ppm	MDK	03-AUG-00	6010
L001028-029	19-JUN-00	B-58 (14.5)	ZN	7.	ppm	MDK	03-AUG-00	6010
L001028-030	19-JUN-00	B-58 (15.7-16)	ZN	9.	ppm	MDK	03-AUG-00	6010
L001028-031	19-JUN-00	B-57 (2-2.5)	HG MOIST. ZN	<0.05 17. 36.	ppm % ppm	EH MJF MDK	17-JUL-00 15-JUL-00 03-AUG-00	7471 GRAV. 6010
L001028-032	19-JUN-00	B-57 (5.5)	ZN	37.	ppm	MDK	03-AUG-00	6010
L001028-033	19-JUN-00	B-57 (8.5)	ZN	27.	ppm	MDK	03-AUG-00	6010
L001028-034	19-JUN-00	B-57 (11.5)	ZN	26.	ppm	MDK	03-AUG-00	6010
L001028-035	19-JUN-00	B-57 (14.5)	ZN	9.	ppm	MDK	03-AUG-00	6010
L001028-036	19-JUN-00	B-57 (15.6-16)	ZN	7.	ppm	MDK	03-AUG-00	6010
L001028-037	19-JUN-00	B-60 (2-2.5)	CR CU MN SB TL ZN	20.* 53. 238. 2. 1. 619.	ppm ppm ppm ppm ppm ppm	MDK MDK MDK MDK MDK MDK	03-AUG-00 03-AUG-00 03-AUG-00 03-AUG-00 03-AUG-00 03-AUG-00	6010 6010 6010 6010 6010 6010
L001028-038	19-JUN-00	B-60 (5.5)	CR CU SB ZN	9.* 6. 1. 34.	ppm ppm ppm ppm	MDK MDK MDK MDK	03-AUG-00 03-AUG-00 03-AUG-00 03-AUG-00	6010 6010 6010 6010
L001028-039	19-JUN-00	B-60 (8.5)	SB ZN	2. 36.	ppm ppm	MDK MDK	03-AUG-00 03-AUG-00	6010 6010
L001028-040	19-JUN-00	B-60 (10-11)	SB ZN	1. 40.	ppm ppm	MDK MDK	03-AUG-00 03-AUG-00	6010 6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

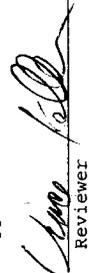
Batch No: L001028

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001028-041	19-JUN-00	B-70 (2-2.5)	CD	13.	ppm	MDK	03-AUG-00	6010
			CR	16.	ppm	MDK	03-AUG-00	6010
			MN	311.	ppm	MDK	03-AUG-00	6010
			TL	2.***	ppm	MDK	03-AUG-00	6010
L001028-042	19-JUN-00	B-70 (5.5)	ZN	296.	ppm	MDK	03-AUG-00	6010
			CD	16.	ppm	MDK	03-AUG-00	6010
			CR	15.	ppm	MDK	03-AUG-00	6010
			TL	2.***	ppm	MDK	03-AUG-00	6010
L001028-043	19-JUN-00	B-70 (8.5)	ZN	342.	ppm	MDK	03-AUG-00	6010
			CD	4.	ppm	MDK	03-AUG-00	6010
			CR	11.	ppm	MDK	03-AUG-00	6010
			TL	7.***	ppm	MDK	03-AUG-00	6010
L001028-044	19-JUN-00	B-70 (11.5-12)	ZN	101.	ppm	MDK	03-AUG-00	6010
			TL	3.***	ppm	MDK	03-AUG-00	6010
			CR	20.	ppm	MDK	03-AUG-00	6010
			ZN					

(\*) : Quality control data indicates a possible bias. See QC data for details.

Unless otherwise noted results are not blank corrected.

  
 Approved

  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle//Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000665-1		Matrix Spike	AG	108	%Recovery	MDK	03-AUG-00	6010	6010			
			AS	97	%Recovery	MDK	03-AUG-00	6010	6010			
			BA	97	%Recovery	MDK	03-AUG-00	6010	6010			
			BI	101	%Recovery	MDK	03-AUG-00	6010	6010			
			CD	94	%Recovery	MDK	03-AUG-00	6010	6010			
			CO	97	%Recovery	MDK	03-AUG-00	6010	6010			
			CR	149*	%Recovery	MDK	03-AUG-00	6010	6010			
			CU	113	%Recovery	MDK	03-AUG-00	6010	6010			
			HG	101	%Recovery	EH	17-JUL-00	7471	7471			
			MN	98	%Recovery	MDK	03-AUG-00	6010	6010			
			NI	106	%Recovery	MDK	03-AUG-00	6010	6010			
			PB	98	%Recovery	MDK	03-AUG-00	6010	6010			
			SB	74*	%Recovery	MDK	03-AUG-00	6010	6010			
			SE	83	%Recovery	MDK	03-AUG-00	6010	6010			
			SN	101	%Recovery	MDK	03-AUG-00	6010	6010			
			TL	93	%Recovery	MDK	03-AUG-00	6010	6010			
			V	104	%Recovery	MDK	03-AUG-00	6010	6010			
			ZN	79	%Recovery	MDK	03-AUG-00	6010	6010			
			WG000665-2		Prep Blank	AG	<0.5	ppm	MDK	03-AUG-00	6010	6010
						AS	<5.0	ppm	MDK	03-AUG-00	6010	6010
BA	<5.0	ppm				MDK	03-AUG-00	6010	6010			
BI	<4.0	ppm				MDK	03-AUG-00	6010	6010			
CD	<1.0	ppm				MDK	03-AUG-00	6010	6010			
CO	<5.0	ppm				MDK	03-AUG-00	6010	6010			
CR	<5.0	ppm				MDK	03-AUG-00	6010	6010			
CU	<5.0	ppm				MDK	03-AUG-00	6010	6010			
HG	<0.05	ppm				EH	17-JUL-00	7471	7471			
MN	<5.0	ppm				MDK	03-AUG-00	6010	6010			
NI	<5.0	ppm				MDK	03-AUG-00	6010	6010			
PB	<5.0	ppm				MDK	03-AUG-00	6010	6010			
SB	<0.80	ppm				MDK	03-AUG-00	6010	6010			
SE	<0.80	ppm				MDK	03-AUG-00	6010	6010			
SN	<5.0	ppm				MDK	03-AUG-00	6010	6010			
TL	<1.0	ppm				MDK	03-AUG-00	6010	6010			
V	<5.0	ppm				MDK	03-AUG-00	6010	6010			
ZN	<5.0	ppm				MDK	03-AUG-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000665-3		Lab Control Sample	AG	103	%Recovery	MDK	03-AUG-00	6010	6010			
			AS	105	%Recovery	MDK	03-AUG-00	6010	6010			
			BA	102	%Recovery	MDK	03-AUG-00	6010	6010			
			BI	100	%Recovery	MDK	03-AUG-00	6010	6010			
			CD	101	%Recovery	MDK	03-AUG-00	6010	6010			
			CO	98	%Recovery	MDK	03-AUG-00	6010	6010			
			CR	104	%Recovery	MDK	03-AUG-00	6010	6010			
			CU	108	%Recovery	MDK	03-AUG-00	6010	6010			
			HG	107	%Recovery	EH	17-JUL-00	7471	7471	7471		
			MN	108	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			NI	102	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			PB	103	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			SB	163**	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			SE	86	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			SN	112	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			TL	104	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			V	106	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			ZN	99	%Recovery	MDK	03-AUG-00	6010	6010	6010		
			WG000665-4		Matrix Spike Duplicate	AG	<1	% RPD	MDK	03-AUG-00	6010	6010
						AS	3.4	% RPD	MDK	03-AUG-00	6010	6010
BA	1.9	% RPD				MDK	03-AUG-00	6010	6010			
BI	3.5	% RPD				MDK	03-AUG-00	6010	6010			
CD	<1	% RPD				MDK	03-AUG-00	6010	6010			
CO	1.	% RPD				MDK	03-AUG-00	6010	6010			
CR	1.2	% RPD				MDK	03-AUG-00	6010	6010			
CU	<1	% RPD				MDK	03-AUG-00	6010	6010			
HG	3.7	% RPD				EH	17-JUL-00	7471	7471			
MN	<1	% RPD				MDK	03-AUG-00	6010	6010			
NI	<1	% RPD				MDK	03-AUG-00	6010	6010			
PB	3.1	% RPD				MDK	03-AUG-00	6010	6010			
SB	10.	% RPD				MDK	03-AUG-00	6010	6010			
SE	3.7	% RPD				MDK	03-AUG-00	6010	6010			
SN	3.4	% RPD				MDK	03-AUG-00	6010	6010			
TL	1.9	% RPD				MDK	03-AUG-00	6010	6010			
V	2.5	% RPD				MDK	03-AUG-00	6010	6010			
ZN	<1	% RPD				MDK	03-AUG-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000665-5		Reporting Limit	AG	0.5	ppm				6010			
			AS	5.0	ppm				6010			
			BA	5.0	ppm					6010		
			BI	5.0	ppm					6010		
			CD	1.0	ppm					6010		
			CO	5.0	ppm					6010		
			CR	5.0	ppm					6010		
			CU	5.0	ppm					6010		
			HG	0.05	ppm					7471		
			MN	5.0	ppm					6010		
			NI	5.0	ppm					6010		
			PB	5.0	ppm					6010		
			SB	0.80	ppm					6010		
			SE	0.80	ppm					6010		
			SN	5.0	ppm					6010		
			TL	1.0	ppm					6010		
			V	5.0	ppm					6010		
			ZN	5.0	ppm					6010		
			WG000665-6		Matrix Spike	AG	98	%Recovery	MDK	03-AUG-00		6010
						AS	93	%Recovery	MDK	03-AUG-00		6010
BA	95	%Recovery				MDK	03-AUG-00		6010			
BI	97	%Recovery				MDK	03-AUG-00		6010			
CD	94	%Recovery				MDK	03-AUG-00		6010			
CO	95	%Recovery				MDK	03-AUG-00		6010			
CR	224*	%Recovery				MDK	03-AUG-00		6010			
CU	107	%Recovery				MDK	03-AUG-00		6010			
MN	102	%Recovery				MDK	03-AUG-00		6010			
NI	118	%Recovery				MDK	03-AUG-00		6010			
PB	96	%Recovery				MDK	03-AUG-00		6010			
SB	82	%Recovery				MDK	03-AUG-00		6010			
SE	80	%Recovery				MDK	03-AUG-00		6010			
SN	98	%Recovery				MDK	03-AUG-00		6010			
TL	91	%Recovery				MDK	03-AUG-00		6010			
V	99	%Recovery				MDK	03-AUG-00		6010			
ZN	93	%Recovery				MDK	03-AUG-00		6010			
WG000665-7		Prep Blank				AG	<0.5	ppm	MDK	03-AUG-00		6010
						AS	<5.0	ppm	MDK	03-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000665-7		Prep Blank	BA	<5.0	ppm	MDK	03-AUG-00		6010			
			BI	<5.0	ppm	MDK	03-AUG-00		6010			
			CD	<1.0	ppm	MDK	03-AUG-00		6010			
			CO	<5.0	ppm	MDK	03-AUG-00		6010			
			CR	<5.0	ppm	MDK	03-AUG-00		6010			
			CU	<5.0	ppm	MDK	03-AUG-00		6010			
			MN	<5.0	ppm	MDK	03-AUG-00		6010			
			NI	<5.0	ppm	MDK	03-AUG-00		6010			
			PB	<5.0	ppm	MDK	03-AUG-00		6010			
			SB	<0.8	ppm	MDK	03-AUG-00		6010			
			SE	<0.8	ppm	MDK	03-AUG-00		6010			
			SN	<5.0	ppm	MDK	03-AUG-00		6010			
			TL	<1.0	ppm	MDK	03-AUG-00		6010			
			V	<5.0	ppm	MDK	03-AUG-00		6010			
			ZN	<5.0	ppm	MDK	03-AUG-00		6010			
			WG000665-8		Lab Control Sample	AG	107	%Recovery	MDK	03-AUG-00		6010
						AS	104	%Recovery	MDK	03-AUG-00		6010
						BA	103	%Recovery	MDK	03-AUG-00		6010
						BI	96	%Recovery	MDK	03-AUG-00		6010
						CD	103	%Recovery	MDK	03-AUG-00		6010
CO	103	%Recovery				MDK	03-AUG-00		6010			
CR	109	%Recovery				MDK	03-AUG-00		6010			
CU	110	%Recovery				MDK	03-AUG-00		6010			
MN	117	%Recovery				MDK	03-AUG-00		6010			
NI	105	%Recovery				MDK	03-AUG-00		6010			
PB	100	%Recovery				MDK	03-AUG-00		6010			
SB	173**	%Recovery				MDK	03-AUG-00		6010			
SE	88	%Recovery				MDK	03-AUG-00		6010			
SN	115	%Recovery				MDK	03-AUG-00		6010			
TL	106	%Recovery				MDK	03-AUG-00		6010			
V	112	%Recovery				MDK	03-AUG-00		6010			
ZN	106	%Recovery				MDK	03-AUG-00		6010			
WG000665-9		Matrix Spike Duplicate				AG	4.	% RPD	MDK	03-AUG-00		6010
						AS	2.4	% RPD	MDK	03-AUG-00		6010
						BA	3.7	% RPD	MDK	03-AUG-00		6010
			BI	2.	% RPD	MDK	03-AUG-00		6010			
			CD	3.1	% RPD	MDK	03-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000665-9		Matrix Spike Duplicate	CO	2.6	% RPD	MDK	03-AUG-00	6010	6010			
			CR	5.9	% RPD	MDK	03-AUG-00	6010	6010			
			CU	2.1	% RPD	MDK	03-AUG-00	6010	6010			
			MN	4.9	% RPD	MDK	03-AUG-00	6010	6010			
			NI	4.3	% RPD	MDK	03-AUG-00	6010	6010			
			PB	3.3	% RPD	MDK	03-AUG-00	6010	6010			
			SB	<1	% RPD	MDK	03-AUG-00	6010	6010			
			SE	2.9	% RPD	MDK	03-AUG-00	6010	6010			
			SN	2.3	% RPD	MDK	03-AUG-00	6010	6010			
			TL	5.	% RPD	MDK	03-AUG-00	6010	6010			
			V	2.7	% RPD	MDK	03-AUG-00	6010	6010			
			ZN	3.6	% RPD	MDK	03-AUG-00	6010	6010			
			WG000665-11		Matrix Spike	AG	112	%Recovery	MDK	03-AUG-00	6010	6010
						AS	97	%Recovery	MDK	03-AUG-00	6010	6010
						BA	95	%Recovery	MDK	03-AUG-00	6010	6010
						BI	101	%Recovery	MDK	03-AUG-00	6010	6010
						CD	101	%Recovery	MDK	03-AUG-00	6010	6010
CO	98	%Recovery				MDK	03-AUG-00	6010	6010			
CR	110	%Recovery				MDK	03-AUG-00	6010	6010			
CU	113	%Recovery				MDK	03-AUG-00	6010	6010			
MN	109	%Recovery				MDK	03-AUG-00	6010	6010			
NI	99	%Recovery				MDK	03-AUG-00	6010	6010			
PB	100	%Recovery				MDK	03-AUG-00	6010	6010			
SB	59*	%Recovery				MDK	03-AUG-00	6010	6010			
SE	84	%Recovery				MDK	03-AUG-00	6010	6010			
SN	99	%Recovery				MDK	03-AUG-00	6010	6010			
TL	92	%Recovery				MDK	03-AUG-00	6010	6010			
V	107	%Recovery				MDK	03-AUG-00	6010	6010			
ZN	94	%Recovery				MDK	03-AUG-00	6010	6010			
WG000665-12		Prep Blank	AG	<0.5	ppm	MDK	03-AUG-00	6010	6010			
			AS	<5.0	ppm	MDK	03-AUG-00	6010	6010			
			BA	<5.0	ppm	MDK	03-AUG-00	6010	6010			
			BI	<5.0	ppm	MDK	03-AUG-00	6010	6010			
			CD	<1.0	ppm	MDK	03-AUG-00	6010	6010			
			CO	<5.0	ppm	MDK	03-AUG-00	6010	6010			
			CR	<5.0	ppm	MDK	03-AUG-00	6010	6010			
			CU	<5.0	ppm	MDK	03-AUG-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000665-12		Prep Blank	MN	<5.0	ppm	MDK	03-AUG-00	6010	6010
			NI	<5.0	ppm	MDK	03-AUG-00	6010	6010
			PB	<5.0	ppm	MDK	03-AUG-00	6010	6010
			SB	<0.8	ppm	MDK	03-AUG-00	6010	6010
			SE	<0.8	ppm	MDK	03-AUG-00	6010	6010
			SN	<5.0	ppm	MDK	03-AUG-00	6010	6010
			TL	1.2	ppm	MDK	03-AUG-00	6010	6010
			V	<5.0	ppm	MDK	03-AUG-00	6010	6010
			ZN	<5.0	ppm	MDK	03-AUG-00	6010	6010
			AG	107	%Recovery	MDK	03-AUG-00	6010	6010
			AS	103	%Recovery	MDK	03-AUG-00	6010	6010
			BA	105	%Recovery	MDK	03-AUG-00	6010	6010
			BI	98	%Recovery	MDK	03-AUG-00	6010	6010
			CD	104	%Recovery	MDK	03-AUG-00	6010	6010
WG000665-13		Lab Control Sample	CO	101	%Recovery	MDK	03-AUG-00	6010	6010
			CR	107	%Recovery	MDK	03-AUG-00	6010	6010
			CU	109	%Recovery	MDK	03-AUG-00	6010	6010
			MN	109	%Recovery	MDK	03-AUG-00	6010	6010
			NI	102	%Recovery	MDK	03-AUG-00	6010	6010
			PB	101	%Recovery	MDK	03-AUG-00	6010	6010
			SB	164**	%Recovery	MDK	03-AUG-00	6010	6010
			SE	89	%Recovery	MDK	03-AUG-00	6010	6010
			SN	113	%Recovery	MDK	03-AUG-00	6010	6010
			TL	107	%Recovery	MDK	03-AUG-00	6010	6010
			V	111	%Recovery	MDK	03-AUG-00	6010	6010
			ZN	103	%Recovery	MDK	03-AUG-00	6010	6010
			AG	<1	% RPD	MDK	03-AUG-00	6010	6010
			AS	21***	% RPD	MDK	03-AUG-00	6010	6010
WG000665-14		Matrix Spike Duplicate	BA	16	% RPD	MDK	03-AUG-00	6010	6010
			BI	1.5	% RPD	MDK	03-AUG-00	6010	6010
			CD	7.8	% RPD	MDK	03-AUG-00	6010	6010
			CO	22***	% RPD	MDK	03-AUG-00	6010	6010
			CR	17	% RPD	MDK	03-AUG-00	6010	6010
			CU	22***	% RPD	MDK	03-AUG-00	6010	6010
			MN	6.3	% RPD	MDK	03-AUG-00	6010	6010
			NI	21***	% RPD	MDK	03-AUG-00	6010	6010
			PB	18	% RPD	MDK	03-AUG-00	6010	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000665

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000665-14		Matrix Spike Duplicate	SB	24***	% RPD	MDK	03-AUG-00		6010
			SE	21***	% RPD	MDK	03-AUG-00		6010
			SN	<1	% RPD	MDK	03-AUG-00		6010
			TL	23***	% RPD	MDK	03-AUG-00		6010
			V	19	% RPD	MDK	03-AUG-00		6010
			ZN	7.1	% RPD	MDK	03-AUG-00		6010

\* Spikes outside acceptance limits due to matrix interference.  
 \*\* LCS for Sb is within ERA (244) 95% confidence interval.  
 \*\*\* Duplicate Spike recoveries for the last four samples were out of range due to non-homogeneity of spiked sample.

  
 Approved  
  
 Reviewer



September 18, 2000

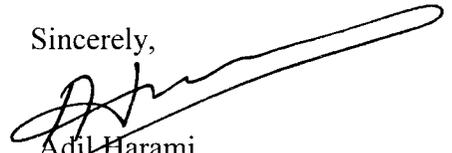
Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (34), thirty four soil samples collected between June 21, and June 22 , 2000 in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 23, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,



Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000972

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000972-001	21-JUN-00	B79 (0-0.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	101.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	12.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	13.	ppm	MDK	10-AUG-00		6010
			CR	28.	ppm	MDK	10-AUG-00		6010
			CU	11.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	665.*	ppm	MDK	10-AUG-00		6010
			MOIST.	17.	%	MJF	28-JUN-00		GRAV.
			NI	15.	ppm	MDK	10-AUG-00		6010
			PB	14.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	14.	ppm	MDK	10-AUG-00		6010
			ZN	2867.	ppm	MDK	10-AUG-00		6010
L000972-002	21-JUN-00	B79 (2-2.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	142.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	5.	ppm	MDK	10-AUG-00		6010
			CR	14.	ppm	MDK	10-AUG-00		6010
			CU	10.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	367.*	ppm	MDK	10-AUG-00		6010
			MOIST.	19.	%	MJF	28-JUN-00		GRAV.
			NI	10.	ppm	MDK	10-AUG-00		6010
			PB	9.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010

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L000972-002	21-JUN-00	B79 (2-2.5)	V	25.	ppm	MDK	10-AUG-00		6010
			ZN	74.	ppm	MDK	10-AUG-00		6010
L000972-003	21-JUN-00	B79 (5.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	8.	ppm	MDK	10-AUG-00		6010
			BA	303.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN	<0.04	ppm	DC	30-JUN-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	21.	ppm	MDK	10-AUG-00		6010
			CU	11.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	373.*	ppm	MDK	10-AUG-00		6010
			MOIST.	23.	%	MJF	28-JUN-00		GRAV.
			NI	12.	ppm	MDK	10-AUG-00		6010
			PB	11.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
SN	<5.	ppm	MDK	10-AUG-00		6010			
TL	<1.	ppm	MDK	10-AUG-00		6010			
V	61.	ppm	MDK	10-AUG-00		6010			
ZN	69.	ppm	MDK	10-AUG-00		6010			
L000972-004	21-JUN-00	B79 (8.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	6.	ppm	MDK	10-AUG-00		6010
			BA	193.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN	<0.04	ppm	DC	30-JUN-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	9.	ppm	MDK	10-AUG-00		6010
			CU	7.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	372.*	ppm	MDK	10-AUG-00		6010
			MOIST.	18.	%	MJF	28-JUN-00		GRAV.
			NI	9.	ppm	MDK	10-AUG-00		6010
			PB	9.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010

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L000972-004	21-JUN-00	B79 (8.5)	SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	27.	ppm	MDK	10-AUG-00		6010
			ZN	36.	ppm	MDK	10-AUG-00		6010
			AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	7.	ppm	MDK	10-AUG-00		6010
L000972-005	21-JUN-00	B79 (11.5)	EA	312.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	12.	ppm	MDK	10-AUG-00		6010
			CU	7.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	337.*	ppm	MDK	10-AUG-00		6010
			MOIST.	19.	%	MJF	28-JUN-00		GRAV.
			NI	8.	ppm	MDK	10-AUG-00		6010
			PB	9.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
SN	<5.	ppm	MDK	10-AUG-00		6010			
TL	<1.	ppm	MDK	10-AUG-00		6010			
V	30.	ppm	MDK	10-AUG-00		6010			
ZN	41.	ppm	MDK	10-AUG-00		6010			
L000972-006	21-JUN-00	B79 (14.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	7.	ppm	MDK	10-AUG-00		6010
			BA	337.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	15.	ppm	MDK	10-AUG-00		6010
			CU	10.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	325.*	ppm	MDK	10-AUG-00		6010
			MOIST.	21.	%	MJF	28-JUN-00		GRAV.

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L000972-006	21-JUN-00	B79 (14.5)	NI	16.	ppm	MDK	10-AUG-00		6010
			PB	11.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	1.	ppm	MDK	10-AUG-00		6010
			V	34.	ppm	MDK	10-AUG-00		6010
			ZN	56.	ppm	MDK	10-AUG-00		6010
			AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	6.	ppm	MDK	10-AUG-00		6010
			BA	357.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
L000972-007	21-JUN-00	B79 (17.5)	CN-	<0.04	ppm	DC	30-JUN-00	335.2	
			CO	8.	ppm	MDK	10-AUG-00		6010
			CR	12.	ppm	MDK	10-AUG-00		6010
			CU	10.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	690.*	ppm	MDK	10-AUG-00		6010
			MOIST.	25.	%	MJF	28-JUN-00		GRAV.
			NI	13.	ppm	MDK	10-AUG-00		6010
			PB	13.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
V	31.	ppm	MDK	10-AUG-00		6010			
ZN	51.	ppm	MDK	10-AUG-00		6010			
L000972-008	21-JUN-00	B79 (18-18.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	375.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	16.	ppm	MDK	10-AUG-00		6010
			CU	9.	ppm	MDK	10-AUG-00		6010

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L000972-008	21-JUN-00	B79 (18-18.5)	HG	<0.05	ppm	EH	05-JUL-00	7471				
			MN	389.*	ppm	MDK	10-AUG-00	6010				
			MOIST.	30.	%	MJF	28-JUN-00	GRAV.				
			NI	12.	ppm	MDK	10-AUG-00	6010				
			PB	10.	ppm	MDK	10-AUG-00	6010				
			SB	2.*	ppm	MDK	10-AUG-00	6010				
			SE	<0.8	ppm	MDK	10-AUG-00	6010				
			SN	<5.	ppm	MDK	10-AUG-00	6010				
			TL	<1.	ppm	MDK	10-AUG-00	6010				
			V	33.	ppm	MDK	10-AUG-00	6010				
			ZN	73.	ppm	MDK	10-AUG-00	6010				
			L000972-009	21-JUN-00	DUPLICATE 21	AG	<0.5	ppm	MDK	10-AUG-00	6010	
						AS	8.	ppm	MDK	10-AUG-00	6010	
						BA	389.	ppm	MDK	10-AUG-00	6010	
						BI	<4.	ppm	MDK	10-AUG-00	6010	
						CD	<1.	ppm	MDK	10-AUG-00	6010	
CN-	<0.04	ppm				DC	30-JUN-00	335.2				
CO	6.	ppm				MDK	10-AUG-00	6010				
CR	12.	ppm				MDK	10-AUG-00	6010				
CU	8.	ppm				MDK	10-AUG-00	6010				
HG	<0.05	ppm				EH	05-JUL-00	7471				
MN	629.*	ppm				MDK	10-AUG-00	6010				
MOIST.	22.	%				MJF	28-JUN-00	GRAV.				
NI	9.	ppm				MDK	10-AUG-00	6010				
PB	9.	ppm				MDK	10-AUG-00	6010				
SB	2.*	ppm				MDK	10-AUG-00	6010				
SE	<0.8	ppm				MDK	10-AUG-00	6010				
SN	<5.	ppm	MDK	10-AUG-00	6010							
TL	<1.	ppm	MDK	10-AUG-00	6010							
V	39.	ppm	MDK	10-AUG-00	6010							
ZN	43.	ppm	MDK	10-AUG-00	6010							
L000972-010	21-JUN-00	DUPLICATE 22	AG	<0.5	ppm	MDK	10-AUG-00	6010				
			AS	8.	ppm	MDK	10-AUG-00	6010				
			BA	179.	ppm	MDK	10-AUG-00	6010				
			BI	<4.	ppm	MDK	10-AUG-00	6010				
			CD	1.	ppm	MDK	10-AUG-00	6010				
			CN-	<0.04	ppm	DC	30-JUN-00	335.2				

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L000972-010	21-JUN-00	DUPLICATE 22	CO	6.	ppm	MDK	10-AUG-00		6010			
			CR	11.	ppm	MDK	10-AUG-00		6010			
			CU	9.	ppm	MDK	10-AUG-00		6010			
			HG	<0.05	ppm	EH	05-JUL-00		7471			
			MN	267.*	ppm	MDK	10-AUG-00		6010			
			MOIST.	20.	%	MJF	28-JUN-00		GRAV.			
			NI	10.	ppm	MDK	10-AUG-00		6010			
			PB	10.	ppm	MDK	10-AUG-00		6010			
			SB	2.*	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	1.	ppm	MDK	10-AUG-00		6010			
			V	30.	ppm	MDK	10-AUG-00		6010			
			ZN	86.	ppm	MDK	10-AUG-00		6010			
			L000972-011	21-JUN-00	B82 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010
						AS	7.	ppm	MDK	10-AUG-00		6010
						BA	86.	ppm	MDK	10-AUG-00		6010
						BI	5.	ppm	MDK	10-AUG-00		6010
						CD	133.	ppm	MDK	10-AUG-00		6010
						CN-	0.05	ppm	DC	30-JUN-00		335.2
CO	15.	ppm				MDK	10-AUG-00		6010			
CR	59.	ppm				MDK	10-AUG-00		6010			
CU	1130.	ppm				MDK	10-AUG-00		6010			
HG	0.07	ppm				EH	05-JUL-00		7471			
MN	956.*	ppm				MDK	10-AUG-00		6010			
MOIST.	18.	%				MJF	28-JUN-00		GRAV.			
NI	250.	ppm				MDK	10-AUG-00		6010			
PB	57.	ppm				MDK	10-AUG-00		6010			
SB	4.*	ppm				MDK	10-AUG-00		6010			
SE	<0.8	ppm				MDK	10-AUG-00		6010			
SN	7.	ppm				MDK	10-AUG-00		6010			
TL	7.	ppm				MDK	10-AUG-00		6010			
V	15.	ppm	MDK	10-AUG-00		6010						
ZN	16920.	ppm	MDK	16-SEP-00		6010						
L000972-012	21-JUN-00	B82 (2-2.25)	AG	<0.5	ppm	MDK	10-AUG-00		6010			
			AS	<5.	ppm	MDK	10-AUG-00		6010			
			BA	103.	ppm	MDK	10-AUG-00		6010			

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L000972-012	21-JUN-00	B82 (2-2.25)	BI	<4.	ppm	MDK	10-AUG-00	6010				
			CD	159.	ppm	MDK	10-AUG-00	6010				
			CN-	<0.04	ppm	DC	30-JUN-00	335.2				
			CO	7.	ppm	MDK	10-AUG-00	6010				
			CR	27.	ppm	MDK	10-AUG-00	6010				
			CU	14.	ppm	MDK	10-AUG-00	6010				
			HG	<0.05	ppm	EH	05-JUL-00	7471				
			MN	445.*	ppm	MDK	10-AUG-00	6010				
			MOIST.	21.	%	MJF	28-JUN-00	GRAV.				
			NI	37.	ppm	MDK	10-AUG-00	6010				
			PB	<5.	ppm	MDK	10-AUG-00	6010				
			SB	2.*	ppm	MDK	10-AUG-00	6010				
			SE	<0.8	ppm	MDK	10-AUG-00	6010				
			SN	<5.	ppm	MDK	10-AUG-00	6010				
			TL	4.	ppm	MDK	10-AUG-00	6010				
			V	9.	ppm	MDK	10-AUG-00	6010				
			ZN	4204.	ppm	MDK	10-AUG-00	6010				
			L000972-013	21-JUN-00	B82 (5.5)	AG	1.	ppm	MDK	10-AUG-00	6010	
						AS	<5.	ppm	MDK	10-AUG-00	6010	
						BA	50.	ppm	MDK	10-AUG-00	6010	
BI	<4.	ppm				MDK	10-AUG-00	6010				
CD	410.	ppm				MDK	10-AUG-00	6010				
CN-	<0.04	ppm				DC	30-JUN-00	335.2				
CO	7.	ppm				MDK	10-AUG-00	6010				
CR	17.	ppm				MDK	10-AUG-00	6010				
CU	5.	ppm				MDK	10-AUG-00	6010				
HG	<0.05	ppm				EH	05-JUL-00	7471				
MN	3615.*	ppm				MDK	10-AUG-00	6010				
MOIST.	15.	%				MJF	28-JUN-00	GRAV.				
NI	17.	ppm				MDK	10-AUG-00	6010				
PB	<5.	ppm				MDK	10-AUG-00	6010				
SB	2.*	ppm				MDK	10-AUG-00	6010				
SE	<0.8	ppm				MDK	10-AUG-00	6010				
SN	<5.	ppm				MDK	10-AUG-00	6010				
TL	<1.	ppm				MDK	10-AUG-00	6010				
V	11.	ppm				MDK	10-AUG-00	6010				
ZN	26850.	ppm				MDK	16-SEP-00	6010				

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L000972-014	21-JUN-00	B82 (8.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	63.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	261.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	9.	ppm	MDK	10-AUG-00		6010
			CR	34.	ppm	MDK	10-AUG-00		6010
			CU	6.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	1651.*	ppm	MDK	10-AUG-00		6010
			MOIST.	13.	%	MJF	28-JUN-00		GRAV.
			NI	25.	ppm	MDK	10-AUG-00		6010
			PB	7.	ppm	MDK	10-AUG-00		6010
			SB	1.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	12.	ppm	MDK	10-AUG-00		6010
			ZN	12400.	ppm	MDK	16-SEP-00		6010
L000972-015	21-JUN-00	B82 (11.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	7.	ppm	MDK	10-AUG-00		6010
			BA	387.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	4.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	9.	ppm	MDK	10-AUG-00		6010
			CR	15.	ppm	MDK	10-AUG-00		6010
			CU	12.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	515.*	ppm	MDK	10-AUG-00		6010
			MOIST.	21.	%	MJF	28-JUN-00		GRAV.
			NI	13.	ppm	MDK	10-AUG-00		6010
			PB	12.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000972-015	21-JUN-00	B82 (11.5)	V	37.	ppm	MDK	10-AUG-00		6010
			ZN	210.	ppm	MDK	10-AUG-00		6010
L000972-016	21-JUN-00	B82 (14.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	6.	ppm	MDK	10-AUG-00		6010
			BA	339.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	3.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	9.	ppm	MDK	10-AUG-00		6010
			CR	14.	ppm	MDK	10-AUG-00		6010
			CU	12.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	794.*	ppm	MDK	10-AUG-00		6010
			MOIST.	24.	%	MJF	28-JUN-00		GRAV.
			NI	14.	ppm	MDK	10-AUG-00		6010
			PB	13.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	1.	ppm	MDK	10-AUG-00		6010
			V	33.	ppm	MDK	10-AUG-00		6010
			ZN	170.	ppm	MDK	10-AUG-00		6010
L000972-017	21-JUN-00	B82 (17.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	10.	ppm	MDK	10-AUG-00		6010
			BA	224.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	2.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	9.	ppm	MDK	10-AUG-00		6010
			CR	21.	ppm	MDK	10-AUG-00		6010
			CU	12.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	399.*	ppm	MDK	10-AUG-00		6010
			MOIST.	19.	%	MJF	28-JUN-00		GRAV.
			NI	15.	ppm	MDK	10-AUG-00		6010
			PB	12.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010

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L000972-017	21-JUN-00	B82 (17.5)	SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	1.	ppm	MDK	10-AUG-00		6010
			V	44.	ppm	MDK	10-AUG-00		6010
			ZN	144.	ppm	MDK	10-AUG-00		6010
L000972-018	21-JUN-00	B82 (19-20)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	224.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	167.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	15.	ppm	MDK	10-AUG-00		6010
			CU	10.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	918.*	ppm	MDK	10-AUG-00		6010
			MOIST.	24.	%	MJF	28-JUN-00		GRAV.
			NI	19.	ppm	MDK	10-AUG-00		6010
			PB	13.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
TL	<1.	ppm	MDK	10-AUG-00		6010			
V	26.	ppm	MDK	10-AUG-00		6010			
ZN	3902.	ppm	MDK	10-AUG-00		6010			
L000972-019	22-JUN-00	B53 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010
			AS	9.	ppm	MDK	10-AUG-00		6010
			BA	209.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	1214.	ppm	MDK	10-AUG-00		6010
			CN-	0.13	ppm	DC	30-JUN-00		335.2
			CO	32.	ppm	MDK	10-AUG-00		6010
			CR	15.	ppm	MDK	10-AUG-00		6010
			CU	52.	ppm	MDK	10-AUG-00		6010
			HG	0.22	ppm	EH	06-JUL-00		7471
			MN	721.*	ppm	MDK	10-AUG-00		6010
MOIST.	23.	%	MJF	28-JUN-00		GRAV.			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000972-019	22-JUN-00	B53 (0-0.5)	NI	13.	ppm	MDK	10-AUG-00		6010
			PB	195.	ppm	MDK	10-AUG-00		6010
			SB	7.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	20.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	17.	ppm	MDK	10-AUG-00		6010
			ZN	15810.	ppm	MDK	16-SEP-00		6010
			AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	323.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
L000972-020	22-JUN-00	B54 (0-0.5)	CD	9.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	10.	ppm	MDK	10-AUG-00		6010
			CU	7.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	400.*	ppm	MDK	10-AUG-00		6010
			MOIST.	25.	%	MJF	28-JUN-00		GRAV.
			NI	9.	ppm	MDK	10-AUG-00		6010
			PB	11.	ppm	MDK	10-AUG-00		6010
			SB	2.*	ppm	MDK	10-AUG-00		6010
			SE	1.	ppm	MDK	10-AUG-00		6010
L000972-021	22-JUN-00	B85 (0-0.5)	SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	1.	ppm	MDK	10-AUG-00		6010
			V	27.	ppm	MDK	10-AUG-00		6010
			ZN	134.	ppm	MDK	10-AUG-00		6010
			AG	1.	ppm	MDK	10-AUG-00		6010
			AS	13.	ppm	MDK	10-AUG-00		6010
			BA	232.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	62.	ppm	MDK	10-AUG-00		6010
			CN-	0.22	ppm	DC	30-JUN-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	15.	ppm	MDK	10-AUG-00		6010
CU	74.	ppm	MDK	10-AUG-00		6010			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000972-021	22-JUN-00	B85 (0-0.5)	HG	0.13	ppm	EH	05-JUL-00		7471			
			MN	584.*	ppm	MDK	10-AUG-00		6010			
			MOIST.	18.	%	MJF	28-JUN-00		GRAV.			
			NI	15.	ppm	MDK	10-AUG-00		6010			
			PB	178.	ppm	MDK	10-AUG-00		6010			
			SB	3.*	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	6.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	19.	ppm	MDK	10-AUG-00		6010			
			ZN	3925.	ppm	MDK	10-AUG-00		6010			
			L000972-022	22-JUN-00	B87 (0-0.5)	AG	2.	ppm	MDK	10-AUG-00		6010
						AS	<5.	ppm	MDK	10-AUG-00		6010
						BA	84.	ppm	MDK	10-AUG-00		6010
BI	<4.	ppm				MDK	10-AUG-00		6010			
CD	345.	ppm				MDK	10-AUG-00		6010			
CN-	0.17	ppm				DC	30-JUN-00		335.2			
CO	13.	ppm				MDK	10-AUG-00		6010			
CR	19.	ppm				MDK	10-AUG-00		6010			
CU	17.	ppm				MDK	10-AUG-00		6010			
HG	<0.05	ppm				EH	05-JUL-00		7471			
MN	1210.*	ppm				MDK	10-AUG-00		6010			
MOIST.	15.	%				MJF	28-JUN-00		GRAV.			
NI	12.	ppm				MDK	10-AUG-00		6010			
PB	22.	ppm				MDK	10-AUG-00		6010			
SB	2.*	ppm	MDK	10-AUG-00		6010						
SE	<0.8	ppm	MDK	10-AUG-00		6010						
SN	<5.	ppm	MDK	10-AUG-00		6010						
TL	<1.	ppm	MDK	10-AUG-00		6010						
V	12.	ppm	MDK	10-AUG-00		6010						
ZN	30480.	ppm	MDK	16-SEP-00		6010						
L000972-023	22-JUN-00	B46(0-0.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010			
			AS	<5.	ppm	MDK	10-AUG-00		6010			
			BA	165.	ppm	MDK	10-AUG-00		6010			
			BI	<4.	ppm	MDK	10-AUG-00		6010			
			CD	9.	ppm	MDK	10-AUG-00		6010			
			CN-	<0.04	ppm	DC	30-JUN-00		335.2			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	FOLD			
L000972-023	22-JUN-00	B46 (0-0-5)	CO	<5.	ppm	MDK	10-AUG-00	6010			
			CR	12.	ppm	MDK	10-AUG-00	6010			
			CU	10.	ppm	MDK	10-AUG-00	6010			
			HG	0.13	ppm	EH	05-JUL-00	7471			
			MIN	258.*	ppm	MDK	10-AUG-00	6010			
			MOIST.	19.	%	MJF	28-JUN-00	GRAV.			
			NI	9.	ppm	MDK	10-AUG-00	6010			
			PB	12.	ppm	MDK	10-AUG-00	6010			
			SB	3.*	ppm	MDK	10-AUG-00	6010			
			SE	<0.8	ppm	MDK	10-AUG-00	6010			
			SN	<5.	ppm	MDK	10-AUG-00	6010			
			TL	<1.	ppm	MDK	10-AUG-00	6010			
			V	17.	ppm	MDK	10-AUG-00	6010			
			ZN	551.	ppm	MDK	10-AUG-00	6010			
			L000972-024	22-JUN-00	B47 (0-0-5)	AG	<0.5	ppm	MDK	10-AUG-00	6010
						AS	6.	ppm	MDK	10-AUG-00	6010
						BA	168.	ppm	MDK	10-AUG-00	6010
						BI	<4.	ppm	MDK	10-AUG-00	6010
						CD	12.	ppm	MDK	10-AUG-00	6010
						CN-	<0.04	ppm	DC	30-JUN-00	335.2
CO	8.	ppm				MDK	10-AUG-00	6010			
CR	19.	ppm				MDK	10-AUG-00	6010			
CU	26.	ppm				MDK	10-AUG-00	6010			
HG	<0.05	ppm				EH	05-JUL-00	7471			
MN	321.*	ppm				MDK	10-AUG-00	6010			
MOIST.	20.	%				MJF	28-JUN-00	GRAV.			
NI	12.	ppm				MDK	10-AUG-00	6010			
PB	53.	ppm				MDK	10-AUG-00	6010			
SB	4.*	ppm				MDK	10-AUG-00	6010			
SE	<0.8	ppm				MDK	10-AUG-00	6010			
SN	7.	ppm				MDK	10-AUG-00	6010			
TL	<1.	ppm				MDK	10-AUG-00	6010			
V	16.	ppm				MDK	10-AUG-00	6010			
ZN	1650.	ppm				MDK	10-AUG-00	6010			
L000972-025	22-JUN-00	B113 (0-0-5)	AG	11.	ppm	MDK	10-AUG-00	6010			
			AS	415.	ppm	MDK	10-AUG-00	6010			
			BA	712.	ppm	MDK	10-AUG-00	6010			

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L000972-025	22-JUN-00	B113 (0-0.5)	BI	7.	ppm	MDK	10-AUG-00		6010
			CD	1548.	ppm	MDK	10-AUG-00		6010
			CN-	0.75	ppm	DC	30-JUN-00		335.2
			CO	44.	ppm	MDK	10-AUG-00		6010
			CR	45.	ppm	MDK	10-AUG-00		6010
			CU	1670.	ppm	MDK	10-AUG-00		6010
			HG	0.50	ppm	EH	06-JUL-00		7471
			MN	3080.*	ppm	MDK	10-AUG-00		6010
			MOIST.	13.	%	MJF	28-JUN-00		GRAV.
			NI	107.	ppm	MDK	10-AUG-00		6010
			PB	2150.	ppm	MDK	10-AUG-00		6010
			SB	19.*	ppm	MDK	10-AUG-00		6010
			SE	2.	ppm	MDK	10-AUG-00		6010
			SN	24.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	20.	ppm	MDK	10-AUG-00		6010
			ZN	32860.	ppm	MDK	16-SEP-00		6010
L000972-026	22-JUN-00	B113 (2-2.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	6.	ppm	MDK	10-AUG-00		6010
			BA	125.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	411.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	30-JUN-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	14.	ppm	MDK	10-AUG-00		6010
			CU	26.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	414.*	ppm	MDK	10-AUG-00		6010
			MOIST.	23.	%	MJF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	10-AUG-00		6010
			PB	20.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	13.	ppm	MDK	10-AUG-00		6010
			ZN	2825.	ppm	MDK	10-AUG-00		6010

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L000972-027	22-JUN-00	B113 (5.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	329.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	3.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	14.	ppm	MDK	10-AUG-00		6010
			CU	10.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	378.*	ppm	MDK	10-AUG-00		6010
			MOIST.	22.	%	MJF	28-JUN-00		GRAV.
			NI	10.	ppm	MDK	10-AUG-00		6010
			PB	10.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	33.	ppm	MDK	10-AUG-00		6010
			ZN	76.	ppm	MDK	10-AUG-00		6010
L000972-028	22-JUN-00	B113 (8.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	267.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	13.	ppm	MDK	10-AUG-00		6010
			CU	7.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	372.*	ppm	MDK	10-AUG-00		6010
			MOIST.	20.	%	MJF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	10-AUG-00		6010
			PB	11.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	6.	ppm	MDK	10-AUG-00		6010

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000972-028	22-JUN-00	B113 (8.5)	V	32.	ppm	MDK	10-AUG-00		6010
			ZN	62.	ppm	MDK	10-AUG-00		6010
L000972-029	22-JUN-00	B113 (11.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	7.	ppm	MDK	10-AUG-00		6010
			BA	438.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	8.	ppm	MDK	10-AUG-00		6010
			CR	11.	ppm	MDK	10-AUG-00		6010
			CU	9.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	469.*	ppm	MDK	10-AUG-00		6010
			MOIST.	21.	%	MJF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	10-AUG-00		6010
			PB	12.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	4.	ppm	MDK	10-AUG-00		6010
			V	29.	ppm	MDK	10-AUG-00		6010
			ZN	53.	ppm	MDK	10-AUG-00		6010
L000972-030	22-JUN-00	B113 (14.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	8.	ppm	MDK	10-AUG-00		6010
			BA	189.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	8.	ppm	MDK	10-AUG-00		6010
			CU	5.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	1679.*	ppm	MDK	10-AUG-00		6010
			MOIST.	13.	%	MJF	28-JUN-00		GRAV.
			NI	5.	ppm	MDK	10-AUG-00		6010
			PB	10.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000972

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	MOID DAYS	METHOD
L000972-030	22-JUN-00	B113 (14.5)	SE	<0.8	ppm	MDK	10-AUG-00	6010	6010
			SN	<5.	ppm	MDK	10-AUG-00	6010	6010
			TL	<1.	ppm	MDK	10-AUG-00	6010	6010
			V	16.	ppm	MDK	10-AUG-00	6010	6010
			ZN	37.	ppm	MDK	10-AUG-00	6010	6010
L000972-031	22-JUN-00	B113 (17.3-18)	AG	<0.5	ppm	MDK	10-AUG-00	6010	6010
			AS	<5.	ppm	MDK	10-AUG-00	6010	6010
			BA	145.	ppm	MDK	10-AUG-00	6010	6010
			BI	<4.	ppm	MDK	10-AUG-00	6010	6010
			CD	480.	ppm	MDK	10-AUG-00	6010	6010
			CN-	<0.04	ppm	DC	06-JUL-00	335.2	335.2
			CO	<5.	ppm	MDK	10-AUG-00	6010	6010
			CR	12.	ppm	MDK	10-AUG-00	6010	6010
			CU	6.	ppm	MDK	10-AUG-00	6010	6010
			HG	<0.05	ppm	EH	05-JUL-00	7471	7471
			MN	962.*	ppm	MDK	10-AUG-00	6010	6010
			MOIST.	13.	%	MJF	28-JUN-00	GRAV.	GRAV.
			NI	7.	ppm	MDK	10-AUG-00	6010	6010
			PB	5.	ppm	MDK	10-AUG-00	6010	6010
			SB	2.*	ppm	MDK	10-AUG-00	6010	6010
			SE	<0.8	ppm	MDK	10-AUG-00	6010	6010
			SN	<5.	ppm	MDK	10-AUG-00	6010	6010
			TL	<1.	ppm	MDK	10-AUG-00	6010	6010
			V	11.	ppm	MDK	10-AUG-00	6010	6010
			ZN	1500.	ppm	MDK	10-AUG-00	6010	6010
L000972-032	22-JUN-00	DUPLICATE 23 (0-0.5)	AG	4.	ppm	MDK	10-AUG-00	6010	6010
			AS	36.	ppm	MDK	10-AUG-00	6010	6010
			BA	430.	ppm	MDK	10-AUG-00	6010	6010
			BI	<4.	ppm	MDK	10-AUG-00	6010	6010
			CD	185.	ppm	MDK	10-AUG-00	6010	6010
			CN-	<0.04	ppm	DC	06-JUL-00	335.2	335.2
			CO	13.	ppm	MDK	10-AUG-00	6010	6010
			CR	35.	ppm	MDK	10-AUG-00	6010	6010
			CU	237.	ppm	MDK	10-AUG-00	6010	6010
			HG	0.14	ppm	EH	05-JUL-00	7471	7471
			MN	1170.*	ppm	MDK	10-AUG-00	6010	6010
			MOIST.	15.	%	MJF	28-JUN-00	GRAV.	GRAV.

ASARCO TECHNICAL SERVICES CENTER  
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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000972-032	22-JUN-00	DUPLICATE 23 (0-0.5)	NI	40.	ppm	MDK	10-AUG-00		6010
			PB	375.	ppm	MDK	10-AUG-00		6010
			SB	7.*	ppm	MDK	10-AUG-00		6010
			SE	1.	ppm	MDK	10-AUG-00		6010
			SN	11.	ppm	MDK	10-AUG-00		6010
			TL	1.	ppm	MDK	10-AUG-00		6010
			V	22.	ppm	MDK	10-AUG-00		6010
			ZN	10940.	ppm	MDK	10-AUG-00		6010
L000972-033	22-JUN-00	DUPLICATE 24 (5.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	362.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	2.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	18.	ppm	MDK	10-AUG-00		6010
			CU	12.	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	387.*	ppm	MDK	10-AUG-00		6010
			MOIST.	23.	%	MJF	28-JUN-00		GRAV.
			NI	11.	ppm	MDK	10-AUG-00		6010
			PB	12.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	2.	ppm	MDK	10-AUG-00		6010
			V	37.	ppm	MDK	10-AUG-00		6010
			ZN	120.	ppm	MDK	10-AUG-00		6010
L000972-034	22-JUN-00	DUPLICATE 25	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	164.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	23.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	<5.	ppm	MDK	10-AUG-00		6010
			CR	9.	ppm	MDK	10-AUG-00		6010
			CU	11.	ppm	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

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Encycle/Texas

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Batch No: L000972

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000972-034	22-JUN-00	DUPLICATE 25	HG	<0.05	ppm	EH	05-JUL-00		7471
			MIN	272.*	ppm	MDK	10-AUG-00		6010
			MOIST.	20.	%	MJF	28-JUN-00		GRAV.
			NI	8.	ppm	MDK	10-AUG-00		6010
			PB	14.	ppm	MDK	10-AUG-00		6010
			SB	3.*	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	2.	ppm	MDK	10-AUG-00		6010
			V	14.	ppm	MDK	10-AUG-00		6010
			ZN	915.	ppm	MDK	10-AUG-00		6010

(\*) Quality control data indicates a possible bias. See QC report for details.

Approved  
*AKH for VPK*  
*Deanne Colby*  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

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Technical Services (Project 8201)

Batch No: WG000533

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000533-1		Matrix Spike	AG	105	%Recovery	MDK	10-AUG-00		6010
			AS	94	%Recovery	MDK	10-AUG-00		6010
			BA	101	%Recovery	MDK	10-AUG-00		6010
			BI	93	%Recovery	MDK	10-AUG-00		6010
			CD	92	%Recovery	MDK	10-AUG-00		6010
			CN-	92	%Recovery	DC	30-JUN-00		335.2
			CO	95	%Recovery	MDK	10-AUG-00		6010
			CR	110	%Recovery	MDK	10-AUG-00		6010
			CU	117	%Recovery	MDK	10-AUG-00		6010
			HG	98	%Recovery	EH	05-JUL-00		7471
			MN	128*	%Recovery	MDK	10-AUG-00		6010
			NI	94	%Recovery	MDK	10-AUG-00		6010
			PB	92	%Recovery	MDK	10-AUG-00		6010
			SB	45*	%Recovery	MDK	10-AUG-00		6010
			SE	77	%Recovery	MDK	10-AUG-00		6010
			SN	93	%Recovery	MDK	10-AUG-00		6010
			TL	83	%Recovery	MDK	10-AUG-00		6010
			V	106	%Recovery	MDK	10-AUG-00		6010
			ZN	106	%Recovery	MDK	10-AUG-00		6010
			WG000533-2		Prep Blank	AG	<0.5	ppm	MDK
AS	<5.0	ppm				MDK	10-AUG-00		6010
BA	<5.0	ppm				MDK	10-AUG-00		6010
BI	<4.0	ppm				MDK	10-AUG-00		6010
CD	<1.0	ppm				MDK	10-AUG-00		6010
CN-	<0.04	ppm				DC	30-JUN-00		335.2
CO	<5.0	ppm				MDK	10-AUG-00		6010
CR	<5.0	ppm				MDK	10-AUG-00		6010
CU	<5.0	ppm				MDK	10-AUG-00		6010
HG	<0.05	ppm				EH	05-JUL-00		7471
MN	<5.0	ppm				MDK	10-AUG-00		6010
NI	<5.0	ppm				MDK	10-AUG-00		6010
PB	<5.0	ppm				MDK	10-AUG-00		6010
SB	<0.8	ppm				MDK	10-AUG-00		6010
SE	<0.8	ppm				MDK	10-AUG-00		6010
SN	<5.0	ppm				MDK	10-AUG-00		6010
TL	1.1	ppm				MDK	10-AUG-00		6010
V	<5.0	ppm				MDK	10-AUG-00		6010
ZN	<5.0	ppm				MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
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Technical Services (Project 8201)

Batch No: WG000533

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000533-3		Lab Control Sample	AG	100	\$Recovery	MDK	10-AUG-00		6010
			AS	92	\$Recovery	MDK	10-AUG-00		6010
			BA	101	\$Recovery	MDK	10-AUG-00		6010
			BI	90	\$Recovery	MDK	10-AUG-00		6010
			CD	98	\$Recovery	MDK	10-AUG-00		6010
			CN-	99	\$Recovery	DC	30-JUN-00	335.2	6010
			CO	96	\$Recovery	MDK	10-AUG-00		6010
			CR	101	\$Recovery	MDK	10-AUG-00		6010
			CU	103	\$Recovery	MDK	10-AUG-00		6010
			HG	113	\$Recovery	EH	05-JUL-00	7471	6010
			MN	103	\$Recovery	MDK	10-AUG-00		6010
			NI	93	\$Recovery	MDK	10-AUG-00		6010
			PB	97	\$Recovery	MDK	10-AUG-00		6010
			SB	155**	\$Recovery	MDK	10-AUG-00		6010
			SE	81	\$Recovery	MDK	10-AUG-00		6010
			SN	102	\$Recovery	MDK	10-AUG-00		6010
			TL	97	\$Recovery	MDK	10-AUG-00		6010
			V	107	\$Recovery	MDK	10-AUG-00		6010
			ZN	96	\$Recovery	MDK	10-AUG-00		6010
WG000533-4		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010

ASARCO TECHNICAL SERVICES CENTER  
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Batch No: WG000533

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD			
WG000533-5		Matrix Spike Duplicate	AG	<1	% RPD	MDK	10-AUG-00	6010			
			AS	4.6	% RPD	MDK	10-AUG-00	6010			
			BA	1.2	% RPD	MDK	10-AUG-00	6010			
			BI	2.7	% RPD	MDK	10-AUG-00	6010			
			CD	4.7	% RPD	MDK	10-AUG-00	6010			
			CO	3.9	% RPD	MDK	10-AUG-00	6010			
			CR	13	% RPD	MDK	10-AUG-00	6010			
			CU	3.2	% RPD	MDK	10-AUG-00	6010			
			MN	4.5	% RPD	MDK	10-AUG-00	6010			
			NI	5.6	% RPD	MDK	10-AUG-00	6010			
			PB	1.9	% RPD	MDK	10-AUG-00	6010			
			SB	<1	% RPD	MDK	10-AUG-00	6010			
			SE	4.4	% RPD	MDK	10-AUG-00	6010			
			SN	2.6	% RPD	MDK	10-AUG-00	6010			
			TL	5.8	% RPD	MDK	10-AUG-00	6010			
			V	9.8	% RPD	MDK	10-AUG-00	6010			
			ZN	7.3	% RPD	MDK	10-AUG-00	6010			
			WG000533-6		Duplicate	CN-	16	% RPD	DC	30-JUN-00	335.2
						MOIST.	<1	% RPD	MJF	28-JUN-00	GRAV.
			WG000533-7		Matrix Spike	AG	101	%Recovery	MDK	10-AUG-00	6010
AS	90	%Recovery				MDK	10-AUG-00	6010			
BA	93	%Recovery				MDK	10-AUG-00	6010			
BI	95	%Recovery				MDK	10-AUG-00	6010			
CD	89	%Recovery				MDK	10-AUG-00	6010			
CN-	92	%Recovery				DC	30-JUN-00	335.2			
CO	94	%Recovery				MDK	10-AUG-00	6010			
CR	109	%Recovery				MDK	10-AUG-00	6010			
CU	113	%Recovery				MDK	10-AUG-00	6010			
HG	93	%Recovery				EH	05-JUL-00	7471			
MN	107	%Recovery				MDK	10-AUG-00	6010			
NI	93	%Recovery				MDK	10-AUG-00	6010			
PB	91	%Recovery				MDK	10-AUG-00	6010			
SB	55*	%Recovery				MDK	10-AUG-00	6010			
SE	77	%Recovery				MDK	10-AUG-00	6010			
SN	93	%Recovery				MDK	10-AUG-00	6010			
TL	83	%Recovery				MDK	10-AUG-00	6010			
V	103	%Recovery				MDK	10-AUG-00	6010			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000533-7		Matrix Spike	ZN	94	%Recovery	MDK	10-AUG-00		6010
WG000533-8		Prep Blank	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	<5.0	ppm	MDK	10-AUG-00		6010
			BA	<5.0	ppm	MDK	10-AUG-00		6010
			BI	<4.0	ppm	MDK	10-AUG-00		6010
			CD	<1.0	ppm	MDK	10-AUG-00		6010
			CN	<0.04	ppm	DC	30-JUN-00		335.2
			CO	<5.0	ppm	MDK	10-AUG-00		6010
			CR	<5.0	ppm	MDK	10-AUG-00		6010
			CU	<5.0	ppm	MDK	10-AUG-00		6010
			HG	<0.05	ppm	EH	05-JUL-00		7471
			MN	<5.0	ppm	MDK	10-AUG-00		6010
			NI	<5.0	ppm	MDK	10-AUG-00		6010
			PB	<5.0	ppm	MDK	10-AUG-00		6010
			SB	<0.8	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.0	ppm	MDK	10-AUG-00		6010
			TL	<1.0	ppm	MDK	10-AUG-00		6010
			V	<5.0	ppm	MDK	10-AUG-00		6010
			ZN	<5.0	ppm	MDK	10-AUG-00		6010
WG000533-9		Lab Control Sample	AG	99	%Recovery	MDK	10-AUG-00		6010
			AS	96	%Recovery	MDK	10-AUG-00		6010
			BA	102	%Recovery	MDK	10-AUG-00		6010
			BI	94	%Recovery	MDK	10-AUG-00		6010
			CD	99	%Recovery	MDK	10-AUG-00		6010
			CN	100	%Recovery	DC	30-JUN-00		335.2
			CO	97	%Recovery	MDK	10-AUG-00		6010
			CR	104	%Recovery	MDK	10-AUG-00		6010
			CU	108	%Recovery	MDK	10-AUG-00		6010
			HG	101	%Recovery	EH	05-JUL-00		7471
			MN	106	%Recovery	MDK	10-AUG-00		6010
			NI	98	%Recovery	MDK	10-AUG-00		6010
			PB	97	%Recovery	MDK	10-AUG-00		6010
			SB	160**	%Recovery	MDK	10-AUG-00		6010
			SE	84	%Recovery	MDK	10-AUG-00		6010
			SN	107	%Recovery	MDK	10-AUG-00		6010
			TL	96	%Recovery	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
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 Encycle/Texas

Technical Services (Project )

Batch No: WG000533

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000533-9		Lab Control Sample	V	106	% Recovery	MDK	10-AUG-00	6010	
			ZN	94	% Recovery	MDK	10-AUG-00	6010	
WG000533-10		Matrix Spike Duplicate	AG	1.4	% RPD	MDK	10-AUG-00	6010	
			AS	1.1	% RPD	MDK	10-AUG-00	6010	
			BA	4.3	% RPD	MDK	10-AUG-00	6010	
			BI	<1	% RPD	MDK	10-AUG-00	6010	
			CD	2.4	% RPD	MDK	10-AUG-00	6010	
			CN-	2	% RPD	DC	06-JUL-00	335.2	
			CO	2.3	% RPD	MDK	10-AUG-00	6010	
			CR	8	% RPD	MDK	10-AUG-00	6010	
			CU	4.1	% RPD	MDK	10-AUG-00	6010	
			HG	<1	% RPD	EH	05-JUL-00	7471	
			MN	1.5	% RPD	MDK	10-AUG-00	6010	
			NI	5.2	% RPD	MDK	10-AUG-00	6010	
			PB	1.0	% RPD	MDK	10-AUG-00	6010	
			SB	<1	% RPD	MDK	10-AUG-00	6010	
			SE	<1	% RPD	MDK	10-AUG-00	6010	
			SN	<1	% RPD	MDK	10-AUG-00	6010	
			TL	1.8	% RPD	MDK	10-AUG-00	6010	
			V	5.6	% RPD	MDK	10-AUG-00	6010	
			ZN	4.0	% RPD	MDK	10-AUG-00	6010	
WG000533-11		Duplicate	CN-	1	% RPD	DC	06-JUL-00	335.2	
			MOIST.	<1	% RPD	MJF	28-JUN-00	GRAV.	

\* Spikes outside acceptance limits.  
 \*\* LCS for Sb is within ERA (244) 95% confidence interval.

*AKH for VPK*  
 Approved  
*Deann Cole*  
 Reviewer









Project Number/Name COX00071002  
 Project Location Example, Coconino Co., AZ  
 Laboratory ASAPCO, Salt Lake City, UT  
 Project Manager Ken Brandner  
 Sampler(s)/Affiliation PH ARCADIS

ANALYSIS / METHOD / SIZE  
(A.C. Calc. CN 15)  
Mr. H. N. S. N. S. N.  
T. S. N. V. S. N.  
(8 or 9 hrs)  
(1/2 hr per lead)

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B8A	S	6/22/00 8:15		1 HOLD	1
B8A	S	6/22/00 8:30		1 HOLD	1
B8A	S	6/22/00 8:35		1 HOLD	1
B8A	S	6/22/00 8:40		1 HOLD	1
B8A	S	6/22/00 8:45		1 HOLD	1
B8A	S	6/22/00 8:50		1 HOLD	1
B8A	S	6/22/00 8:55		1 HOLD	1
B8A	S	6/22/00 9:00		1 HOLD	1
B8A	S	6/22/00 9:10		1 HOLD	1
FIELD CLINIC	L	6/22/00 14:00		2 1) metals WITHIN 2) CN - preserved	2

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: PHILIPPI Date 6/22/00 Time 1500 Seal Intact? Yes  
 Received by: ASAPCO Date 6/23/00 Time 1100 Seal Intact? N/A  
 Relinquished by: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks:  
B8A pair of stop of beams (B81, B83, B84) HOLD B84 UNTIL NOTIFIED BY ARCADIS

Delivery Method:  In Person  Common Carrier Sea  Lab Courier  Other \_\_\_\_\_

Project Number/Name: CS00047.0001  
 Project Location: ESUNDO, COMPTON, CHINA, TX  
 Laboratory: ASANO, SALT LAKE CITY, UT  
 Project Manager: Ken Brumbyer  
 Sampler(s)/Affiliation: Jim / ARCADIA

ANALYSIS / METHOD / SIZE  
 TOTAL - Sb, As, Ba, Bi  
 (CA, Cd, Co, Cr, Ni, Se, Ag)  
 (Pb, Hg, Mn, V, Zn)  
 (Cu, Fe, Ni, Pb, Zn, Cr, Ni, Mn, V, Cd, Co, Cr, Ni, Se, Ag)  
 (As, Sb, Ba, Bi)

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B53	S	6/22/00 9:15			1
B53		9:17			1
B53		9:50		HOLD	1
B53		9:55		HOLD	1
B53		10:00		HOLD	1
B53		10:10		HOLD	1
B53		10:17		HOLD	1
BSA		10:35			1
B54		10:37		HOLD	1
BSA		10:41		HOLD	1
BSA		10:45		HOLD	1
BSA		10:50		HOLD	1
B54	S	10:55		HOLD	1
Total No. of Bottles/Containers					13

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: Jim Geraghty Organization: ARCADIA Date: 6/22/00 Time: 10:00 Seal Intact? Yes  
 Received by: STUTCH Organization: ASTRO Date: 6/23/00 Time: 10:00 Seal Intact? Yes  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks:  
(B53, B54) - Run only 0-0.5 - Hold ALL OTHER DETRITS UNTIL NOTIFIED BY ARCADIA  
Results to Ken Brumbyer FAX 361-883-7565  
 Delivery Method:  In Person  Common Carrier  Lab Courier  Other

Project Number/Name: C-000-02-0001  
 Project Location: Example Corporate District TX  
 Laboratory: ASPRILO Substate City UT  
 Project Manager: Ken Farnsworth  
 Sampler(s)/Affiliation: BU / ANALYSTS

ANALYSIS / METHOD / SIZE  
 (8 oz glass w/ Klon hood lid)  
 T1 Sm V. 20  
 Cd (Ce) (CN Pb)  
 TOTH Sp, Pb, Bi

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B85 0-0.5	S	6/22/02 1120			
B85 2.5		1123		HOLD	
B85 5.5		1127		HOLD	
B85 8.5		1130		HOLD	
B85 11.5		1135		HOLD	
B85 14.5		1140		HOLD	
B85 (17.5-18)		1145		HOLD	
B 87 0-0.5		1410			
B 87 2.5		1412		HOLD	
B 87 5.5		1415		HOLD	
B 87 8.5		1420		HOLD	
B 87 11.5		1425		HOLD	
B 87 14.5		1430		HOLD	
B 87 16-16.5	S	1435		HOLD	

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: [Signature] Organization: [Signature]  
 Received by: [Signature] Organization: ASARCO  
 Date 6/22/02 Time 1500 Seal Intact? Yes No N/A  
 Date 6/23/02 Time 1100 Seal Intact? Yes No N/A

Relinquished by: [Signature] Organization: [Signature]  
 Received by: [Signature] Organization: [Signature]  
 Date / / Time  
 Date / / Time

Special Instructions/Remarks: (B85, B87) RUN ONLY 0-0.5 - HOLD ALL OTHER DEPTHS UNIL NOTIFIED BY ANALYSTS

Delivery Method:  In Person  Common Carrier  Lab Courier  Other

Project Number/Name CC0000120001  
 Project Location Enclave, Corpus Christi, TX  
 Laboratory ASARCO, SALT CREEK CITY, UT  
 Project Manager Ken Brandner  
 Sampler(s)/Affiliation BH/ARCADIS

ANALYSIS / METHOD / SIZE  
 (8 oz glass jar lid)  
 T1, S1, V2  
 Mr. H. N. S. AS  
 Callie Le CN PB  
 18 TR - 59, 13, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
BAL6 0-0.5	S	1515			1
BAL6 2-2.5		1517			1
BAL6 5.5		1525			1
BAL6 8.5		1530			1
BAL6 11.5		1535			1
BAL6 14.5		1545			1
BAL6 16-16.5		1555			1
BAL7 (0-0.5)		1605			1
BAL7 (2-2.5)		1607			1
BAL7 5.5		1610			1
BAL7 8.5		1615			1
BAL7 11.5		1620			1
BAL7 14.5					
BAL7	S				

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: Bryan Harty Organization: ARCADIS Date: 6/22/00 Time: 1800 Seal Intact? Yes  
 Received by: Ken Brandner Organization: ASARCO Date: 6/23/00 Time: 1100 Seal Intact? Yes  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: (BAL, BAL7) - RUN 0-0.5 ONLY - HOLD ALL OTHER DEPTH UNTIL NOTIFIED BY ARCADIS

Delivery Method:  In Person  Common Carrier EX  Lab Courier  Other





September 19, 2000

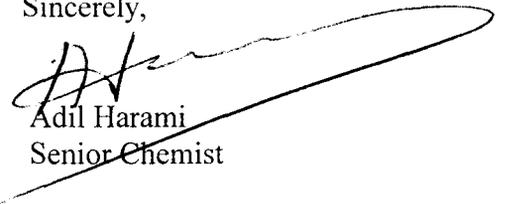
Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (11), eleven soil samples collected on June 15, 2000, in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 16, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,

A handwritten signature in black ink, appearing to read "Adil Harami", is written over a horizontal line. The signature is fluid and cursive.

Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD DAYS	METHOD
							ANALYZED	ANALYZED		
L000929-001	15-JUN-00	B50 (0-0.5)	AG	2.	ppm	MDK	16-SEP-00		6010	
			AS	17.	ppm	MDK	16-SEP-00		6010	
			BA	339.	ppm	MDK	16-SEP-00		6010	
			BI	<4.	ppm	MDK	16-SEP-00		6010	
			CD	36.	ppm	MDK	16-SEP-00		6010	
			CN-	2.8	ppm	DC	29-JUN-00		335.2	
			CO	9.	ppm	MDK	16-SEP-00		6010	
			CR	73.*	ppm	MDK	16-SEP-00		6010	
			CU	165.	ppm	MDK	16-SEP-00		6010	
			HG	0.51	ppm	EH	30-JUN-00		7471	
			MN	651.	ppm	MDK	16-SEP-00		6010	
			MOIST.	16.	%	MJF	25-JUN-00		GRAV.	
			NI	29.	ppm	MDK	16-SEP-00		6010	
			PB	424.	ppm	MDK	16-SEP-00		6010	
			SB	3.*	ppm	MDK	16-SEP-00		6010	
			SE	<0.8	ppm	MDK	16-SEP-00		6010	
			SN	32.	ppm	MDK	16-SEP-00		6010	
			TL	<1.	ppm	MDK	16-SEP-00		6010	
			V	29.	ppm	MDK	16-SEP-00		6010	
			ZN	6892.	ppm	MDK	16-SEP-00		6010	
L000929-002	15-JUN-00	B49 (0-0.5)	AG	2.	ppm	MDK	16-SEP-00		6010	
			AS	13.	ppm	MDK	16-SEP-00		6010	
			BA	409.	ppm	MDK	16-SEP-00		6010	
			BI	<4.	ppm	MDK	16-SEP-00		6010	
			CD	37.	ppm	MDK	16-SEP-00		6010	
			CN-	<0.04	ppm	DC	27-JUN-00		335.2	
			CO	34.	ppm	MDK	16-SEP-00		6010	
			CR	63.*	ppm	MDK	16-SEP-00		6010	
			CU	254.	ppm	MDK	16-SEP-00		6010	
			HG	0.43	ppm	EH	30-JUN-00		7471	
			MN	462.	ppm	MDK	16-SEP-00		6010	
			MOIST.	14.	%	MJF	25-JUN-00		GRAV.	
			NI	42.	ppm	MDK	16-SEP-00		6010	
			PB	423.	ppm	MDK	16-SEP-00		6010	
			SB	2.*	ppm	MDK	16-SEP-00		6010	
			SE	<0.8	ppm	MDK	16-SEP-00		6010	
			SN	23.	ppm	MDK	16-SEP-00		6010	
			TL	1.	ppm	MDK	16-SEP-00		6010	

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000929-002	15-JUN-00	B49 (0-0.5)	V	30.	ppm	MDK	16-SEP-00		6010
			ZN	3715.	ppm	MDK	16-SEP-00		6010
L000929-003	15-JUN-00	B52 (0-0.5)	AG	1.	ppm	MDK	16-SEP-00		6010
			AS	<5.	ppm	MDK	16-SEP-00		6010
			BA	181.	ppm	MDK	16-SEP-00		6010
			BI	<4.	ppm	MDK	16-SEP-00		6010
			CD	4.	ppm	MDK	16-SEP-00		6010
			CN*	<0.04	ppm	DC	27-JUN-00	335.2	6010
			CO	7.	ppm	MDK	16-SEP-00		6010
			CR	46.*	ppm	MDK	16-SEP-00		6010
			CU	23.	ppm	MDK	16-SEP-00		6010
			HG	0.07	ppm	EH	30-JUN-00	7471	6010
			MN	312.	ppm	MDK	16-SEP-00		6010
			MOIST.	20.	%	MJF	25-JUN-00		GRAV.
			NI	25.	ppm	MDK	16-SEP-00		6010
			PB	66.	ppm	MDK	16-SEP-00		6010
			SB	<0.8*	ppm	MDK	16-SEP-00		6010
			SE	<0.8	ppm	MDK	16-SEP-00		6010
			SN	<5.	ppm	MDK	16-SEP-00		6010
			TL	<1.	ppm	MDK	16-SEP-00		6010
			V	22.	ppm	MDK	16-SEP-00		6010
			ZN	707.	ppm	MDK	16-SEP-00		6010
L000929-004	15-JUN-00	B69 (0-0.5)	AG	<0.5	ppm	MDK	16-SEP-00		6010
			AS	<5.	ppm	MDK	16-SEP-00		6010
			BA	132.	ppm	MDK	16-SEP-00		6010
			BI	6.	ppm	MDK	16-SEP-00		6010
			CD	512.	ppm	MDK	16-SEP-00		6010
			CN*	<0.04	ppm	DC	27-JUN-00	335.2	6010
			CO	68.	ppm	MDK	16-SEP-00		6010
			CR	67.*	ppm	MDK	16-SEP-00		6010
			CU	295.	ppm	MDK	16-SEP-00		6010
			HG	<0.05	ppm	EH	30-JUN-00	7471	6010
			MN	746.	ppm	MDK	16-SEP-00		6010
			MOIST.	19.	%	MJF	25-JUN-00		GRAV.
			NI	149.	ppm	MDK	16-SEP-00		6010
			PB	14.	ppm	MDK	16-SEP-00		6010
			SB	<0.8*	ppm	MDK	16-SEP-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB. NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000929-004	15-JUN-00	B69 (0-0.5)	SE	3.	ppm	MDK	16-SEP-00		6010
			SN	6.	ppm	MDK	16-SEP-00		6010
			TL	<1.	ppm	MDK	16-SEP-00		6010
			V	15.	ppm	MDK	16-SEP-00		6010
			ZN	25520.	ppm	MDK	16-SEP-00		6010
L000929-005	15-JUN-00	B67 (0-0.5)	AG	2.	ppm	MDK	16-SEP-00		6010
			AS	<5.	ppm	MDK	16-SEP-00		6010
			BA	161.	ppm	MDK	16-SEP-00		6010
			BI	12.	ppm	MDK	16-SEP-00		6010
			CD	326.	ppm	MDK	16-SEP-00		6010
			CN-	<0.04	ppm	DC	27-JUN-00		335.2
			CO	8.	ppm	MDK	16-SEP-00		6010
			CR	17.*	ppm	MDK	16-SEP-00		6010
			CU	407.	ppm	MDK	16-SEP-00		6010
			HG	0.10	ppm	EH	30-JUN-00		7471
			MN	1297.	ppm	MDK	16-SEP-00		6010
			MOIST.	23.	%	MJF	25-JUN-00		GRAV.
			NI	16.	ppm	MDK	16-SEP-00		6010
			PB	56.	ppm	MDK	16-SEP-00		6010
L000929-006	15-JUN-00	B51 (0-0.5)	SE	<0.8*	ppm	MDK	16-SEP-00		6010
			SN	12.	ppm	MDK	16-SEP-00		6010
			TL	<1.	ppm	MDK	16-SEP-00		6010
			V	18.	ppm	MDK	16-SEP-00		6010
			ZN	52100.	ppm	MDK	16-SEP-00		6010
			AG	3.	ppm	MDK	16-SEP-00		6010
			AS	14.	ppm	MDK	16-SEP-00		6010
			BA	299.	ppm	MDK	16-SEP-00		6010
			BI	<4.	ppm	MDK	16-SEP-00		6010
			CD	24.	ppm	MDK	16-SEP-00		6010
CN-	2.6	ppm	DC	28-JUN-00		335.2			
CO	17.	ppm	MDK	16-SEP-00		6010			
CR	165.*	ppm	MDK	16-SEP-00		6010			
CU	291.	ppm	MDK	16-SEP-00		6010			
HG	0.40	ppm	EH	30-JUN-00		7471			
MN	372.	ppm	MDK	16-SEP-00		6010			
MOIST.	17.	%	MJF	25-JUN-00		GRAV.			

ASARCO TECHNICAL SERVICES CENTER  
 ANALYTICAL DATA REPORT  
 Encycle/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	VOID DAYS	METHOD
L000929-006	15-JUN-00	B51 (0-0.5)	NI	48.	ppm	MDK	16-SEP-00		6010
			PB	675.	ppm	MDK	16-SEP-00		6010
			SB	3.*	ppm	MDK	16-SEP-00		6010
			SE	<0.8	ppm	MDK	16-SEP-00		6010
			SN	22.	ppm	MDK	16-SEP-00		6010
			TL	<1.	ppm	MDK	16-SEP-00		6010
			V	16.	ppm	MDK	16-SEP-00		6010
			ZN	5798.	ppm	MDK	16-SEP-00		6010
			AG	<0.5	ppm	MDK	16-SEP-00		6010
			AS	22.	ppm	MDK	16-SEP-00		6010
			BA	185.	ppm	MDK	16-SEP-00		6010
			BI	<4.	ppm	MDK	16-SEP-00		6010
L000929-007	15-JUN-00	B45 (0-0.5)	CD	31.	ppm	MDK	16-SEP-00		6010
			CN-	0.59	ppm	DC	28-JUN-00		335.2
			CO	36.	ppm	MDK	16-SEP-00		6010
			CR	204.*	ppm	MDK	16-SEP-00		6010
			CU	269.	ppm	MDK	16-SEP-00		6010
			HG	0.30	ppm	EH	30-JUN-00		7471
			MN	193.	ppm	MDK	16-SEP-00		6010
			MOIST.	16.	%	MJF	25-JUN-00		GRAV.
			NI	74.	ppm	MDK	16-SEP-00		6010
			PB	59.	ppm	MDK	16-SEP-00		6010
			SB	<0.8*	ppm	MDK	16-SEP-00		6010
			SE	5.	ppm	MDK	16-SEP-00		6010
L000929-008	15-JUN-00	B44 (0-0.5)	SN	8.	ppm	MDK	16-SEP-00		6010
			TL	8.	ppm	MDK	16-SEP-00		6010
			V	27.	ppm	MDK	16-SEP-00		6010
			ZN	1588.	ppm	MDK	16-SEP-00		6010
			AG	4.	ppm	MDK	16-SEP-00		6010
			AS	28.	ppm	MDK	16-SEP-00		6010
			BA	369.	ppm	MDK	16-SEP-00		6010
			BI	<4.	ppm	MDK	16-SEP-00		6010
			CD	99.	ppm	MDK	16-SEP-00		6010
			CN-	0.16	ppm	DC	28-JUN-00		335.2
			CO	60.	ppm	MDK	16-SEP-00		6010
			CR	60.*	ppm	MDK	16-SEP-00		6010
CU	287.	ppm	MDK	16-SEP-00		6010			

ASARCO TECHNICAL SERVICES CENTER  
 ANALYTICAL DATA REPORT  
 Encycle/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000929-008	15-JUN-00	B44 (0-0.5)	HG	2.1	ppm	EH	05-JUL-00	7471	
			MN	917.	ppm	MDK	16-SEP-00	6010	
			MOIST.	14.	%	MJF	25-JUN-00	GRAV.	
			NI	35.	ppm	MDK	16-SEP-00	6010	
			PB	431.	ppm	MDK	16-SEP-00	6010	
			SB	5.*	ppm	MDK	16-SEP-00	6010	
			SE	5.	ppm	MDK	16-SEP-00	6010	
			SN	36.	ppm	MDK	16-SEP-00	6010	
			TL	3.	ppm	MDK	16-SEP-00	6010	
			V	20.	ppm	MDK	16-SEP-00	6010	
			ZN	7725.	ppm	MDK	16-SEP-00	6010	
L000929-009	15-JUN-00	DUPLICATE 9	AG	1.	ppm	MDK	16-SEP-00	6010	
			AS	18.	ppm	MDK	16-SEP-00	6010	
			BA	674.	ppm	MDK	16-SEP-00	6010	
			BI	<4.	ppm	MDK	16-SEP-00	6010	
			CD	6.	ppm	MDK	16-SEP-00	6010	
			CN-	2.2	ppm	DC	29-JUN-00	335.2	
			CO	8.	ppm	MDK	16-SEP-00	6010	
			CR	60.*	ppm	MDK	16-SEP-00	6010	
			CU	99.	ppm	MDK	16-SEP-00	6010	
			HG	0.23	ppm	EH	30-JUN-00	7471	
			MN	586.	ppm	MDK	16-SEP-00	6010	
			MOIST.	18.	%	MJF	25-JUN-00	GRAV.	
			NI	19.	ppm	MDK	16-SEP-00	6010	
			PB	301.	ppm	MDK	16-SEP-00	6010	
			SB	3.*	ppm	MDK	16-SEP-00	6010	
			SE	<0.8	ppm	MDK	16-SEP-00	6010	
			SN	34.	ppm	MDK	16-SEP-00	6010	
			TL	2.	ppm	MDK	16-SEP-00	6010	
			V	29.	ppm	MDK	16-SEP-00	6010	
			ZN	4347.	ppm	MDK	16-SEP-00	6010	
L000929-010	15-JUN-00	DUPLICATE 10	AG	2.	ppm	MDK	16-SEP-00	6010	
			AS	31.	ppm	MDK	16-SEP-00	6010	
			BA	409.	ppm	MDK	16-SEP-00	6010	
			BI	<4.	ppm	MDK	16-SEP-00	6010	
			CD	54.	ppm	MDK	16-SEP-00	6010	
			CN-	0.14	ppm	DC	28-JUN-00	335.2	

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000929-010	15-JUN-00	DUPLICATE 10	CO	24.	ppm	MDK	16-SEP-00	6010	
			CR	99.*	ppm	MDK	16-SEP-00	6010	
			CU	271.	ppm	MDK	16-SEP-00	6010	
			HG	0.62	ppm	EH	30-JUN-00	7471	
			MN	645.	ppm	MDK	16-SEP-00	6010	
			MOIST.	13.	%	MJF	25-JUN-00	GRAV.	
			NI	48.	ppm	MDK	16-SEP-00	6010	
			PB	722.	ppm	MDK	16-SEP-00	6010	
			SB	5.*	ppm	MDK	16-SEP-00	6010	
			SE	<0.8	ppm	MDK	16-SEP-00	6010	
			SN	33.	ppm	MDK	16-SEP-00	6010	
			TL	1.	ppm	MDK	16-SEP-00	6010	
			V	25.	ppm	MDK	16-SEP-00	6010	
			ZN	7562.	ppm	MDK	16-SEP-00	6010	
L000929-011	15-JUN-00	DUPLICATE 11	AG	2.	ppm	MDK	16-SEP-00	6010	
			AS	18.	ppm	MDK	16-SEP-00	6010	
			BA	242.	ppm	MDK	16-SEP-00	6010	
			BI	<4.	ppm	MDK	16-SEP-00	6010	
			CD	20.	ppm	MDK	16-SEP-00	6010	
			CN-	1.6	ppm	DC	28-JUN-00	335.2	
			CO	12.	ppm	MDK	16-SEP-00	6010	
			CR	169.*	ppm	MDK	16-SEP-00	6010	
			CU	294.	ppm	MDK	16-SEP-00	6010	
			HG	0.16	ppm	EH	30-JUN-00	7471	
			MN	447.	ppm	MDK	16-SEP-00	6010	
			MOIST.	18.	%	MJF	25-JUN-00	GRAV.	
			NI	54.	ppm	MDK	16-SEP-00	6010	
			PB	495.	ppm	MDK	16-SEP-00	6010	
			SB	3.*	ppm	MDK	16-SEP-00	6010	
			SE	<0.8	ppm	MDK	16-SEP-00	6010	
			SN	23.	ppm	MDK	16-SEP-00	6010	
			TL	<1.	ppm	MDK	16-SEP-00	6010	
			V	18.	ppm	MDK	16-SEP-00	6010	
			ZN	5508.	ppm	MDK	16-SEP-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000929

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
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(\*) Quality control data indicates a possible bias. See QC report for details.

AKH for VPK  
Approved  
*[Signature]*  
Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000494

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000494-6		Duplicate	CN-	<1	% RPD	DC	27-JUN-00	335.2	6010
WG000494-1		Matrix Spike	AG	99	%Recovery	MDK	16-SEP-00	6010	6010
	AS		91	%Recovery	MDK	16-SEP-00	6010	6010	6010
	BA		93	%Recovery	MDK	16-SEP-00	6010	6010	6010
	BI		96	%Recovery	MDK	16-SEP-00	6010	6010	6010
	CD		86	%Recovery	MDK	16-SEP-00	6010	6010	6010
	CN-		82	%Recovery	DC	27-JUN-00	335.2	335.2	335.2
	CO		92	%Recovery	MDK	16-SEP-00	6010	6010	6010
	CR		68*	%Recovery	MDK	16-SEP-00	6010	6010	6010
	CU		108	%Recovery	MDK	16-SEP-00	6010	6010	6010
	HG		112	%Recovery	EH	30-JUN-00	7471	7471	7471
	MN		89	%Recovery	MDK	16-SEP-00	6010	6010	6010
	NI		86	%Recovery	MDK	16-SEP-00	6010	6010	6010
	PB		94	%Recovery	MDK	16-SEP-00	6010	6010	6010
	SB		34*	%Recovery	MDK	16-SEP-00	6010	6010	6010
	SE		81	%Recovery	MDK	16-SEP-00	6010	6010	6010
	SN		94	%Recovery	MDK	16-SEP-00	6010	6010	6010
	TL		85	%Recovery	MDK	16-SEP-00	6010	6010	6010
	V		98	%Recovery	MDK	16-SEP-00	6010	6010	6010
	ZN		SR>4SA	%Recovery	MDK	16-SEP-00	6010	6010	6010
	WG000494-2			Prep Blank	AG	<0.5	ppm	MDK	16-SEP-00
AS		<5.0	ppm		MDK	16-SEP-00	6010	6010	
BA		<5.0	ppm		MDK	16-SEP-00	6010	6010	
BI		<4.0	ppm		MDK	16-SEP-00	6010	6010	
CD		<1.0	ppm		MDK	16-SEP-00	6010	6010	
CN-		<0.04	ppm		DC	27-JUN-00	335.2	335.2	
CO		<5.0	ppm		MDK	16-SEP-00	6010	6010	
CR		<5.0	ppm		MDK	16-SEP-00	6010	6010	
CU		<5.0	ppm		MDK	16-SEP-00	6010	6010	
HG		<0.05	ppm		EH	30-JUN-00	7471	7471	
MN		<5.0	ppm		MDK	16-SEP-00	6010	6010	
NI		<5.0	ppm		MDK	16-SEP-00	6010	6010	
PB		<5.0	ppm		MDK	16-SEP-00	6010	6010	
SB		<0.8	ppm		MDK	16-SEP-00	6010	6010	
SE		<0.8	ppm		MDK	16-SEP-00	6010	6010	
SN		<5.0	ppm		MDK	16-SEP-00	6010	6010	
TL	1.1	ppm	MDK	16-SEP-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000494

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000494-2		Prep Blank	V	<5.0	ppm	MDK	16-SEP-00		6010
			ZN	<5.0	ppm	MDK	16-SEP-00		6010
WG000494-3		Lab Control Sample	AG	94	%Recovery	MDK	16-SEP-00		6010
			AS	91	%Recovery	MDK	16-SEP-00		6010
			BA	95	%Recovery	MDK	16-SEP-00		6010
			BI	91	%Recovery	MDK	16-SEP-00		6010
			CD	91	%Recovery	MDK	16-SEP-00		6010
			CN-	92	%Recovery	DC	27-JUN-00	335.2	6010
			CO	91	%Recovery	MDK	16-SEP-00		6010
			CR	96	%Recovery	MDK	16-SEP-00		6010
			CU	102	%Recovery	MDK	16-SEP-00		6010
			HG	99	%Recovery	EH	30-JUN-00	7471	6010
			MN	98	%Recovery	MDK	16-SEP-00		6010
			NI	94	%Recovery	MDK	16-SEP-00		6010
			PB	92	%Recovery	MDK	16-SEP-00		6010
			SB	132**	%Recovery	MDK	16-SEP-00		6010
			SE	80	%Recovery	MDK	16-SEP-00		6010
			SN	102	%Recovery	MDK	16-SEP-00		6010
			TL	95	%Recovery	MDK	16-SEP-00		6010
			V	97	%Recovery	MDK	16-SEP-00		6010
			ZN	96	%Recovery	MDK	16-SEP-00		6010
WG000494-4		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000494

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000494-4		Reporting Limit	TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010
WG000494-5		Matrix Spike Duplicate	AG	6.8	% RPD	MDK	16-SEP-00		6010
			AS	<1	% RPD	MDK	16-SEP-00		6010
			BA	<1	% RPD	MDK	16-SEP-00		6010
			BI	2	% RPD	MDK	16-SEP-00		6010
			CD	8.1	% RPD	MDK	16-SEP-00		6010
			CO	<1	% RPD	MDK	16-SEP-00		6010
			CR	12	% RPD	MDK	16-SEP-00		6010
			CU	2.2	% RPD	MDK	16-SEP-00		6010
			HG	13	% RPD	EH	30-JUN-00		7471
			MN	2.7	% RPD	MDK	16-SEP-00		6010
			NI	8.9	% RPD	MDK	16-SEP-00		6010
			PB	1.2	% RPD	MDK	16-SEP-00		6010
			SB	25***	% RPD	MDK	16-SEP-00		6010
			SE	1.1	% RPD	MDK	16-SEP-00		6010
			SN	<1	% RPD	MDK	16-SEP-00		6010
			TL	1.1	% RPD	MDK	16-SEP-00		6010
			V	1.7	% RPD	MDK	16-SEP-00		6010
			ZN	3.3	% RPD	MDK	16-SEP-00		6010

\* Spikes outside acceptance limits due to matrix interference.  
 \*\* LCS for Sb is within ERA (244) 95% confidence interval.  
 \*\*\* Duplicate spike recovery for Sb is out of range.

AKH for VPK  
 Approved  
*Deane Cole*  
 Reviewer

Project Number/Name: CC000642.0001  
 Project Location: ENCYCLE, COMPA (MASH) IX  
 Laboratory: ASHMO, SHELTON CITY, VT  
 Project Manager: Ken Brasher  
 Sampler(s)/Affiliation: Ken Brasher

ANALYSIS / METHOD / SIZE  
 (8) 2 glass jar w/ teflon lined lid  
 T.S.N.Y. 20  
 MR. NG, N. SE, AG  
 CN Pb, Bi  
 TOTAL Sp. A, B, C, D

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B50 (0-0.5)	S	6/15/00 855			1
B50 (2-2.5)	S	857		HOLD	1
B50 (5-5)	S	903		HOLD	1
B50 (8-5)	S	905		HOLD	1
B50 (11-5)	S	910		HOLD	1
B50 (12.5-13)	S	911		HOLD	1
B49 (0-0.5)	S	932			1
B49 (2-2.5)	S	935		HOLD	1
B49 (5-5)	S	937		HOLD	1
B49 (8-5)	S	945		HOLD	1
B49 (11-5)	S	947		HOLD	1
B49 (14-11.5)	S	952		HOLD	1
V					
Total No. of Bottles/Containers					12

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: BRUNER HANNA Organization: ARCADIS Date: 6/15/00 Time: 1010 Seal Intact? Yes (X) No N/A  
 Received by: HOTTEN Organization: ASHMO Date: 6/16/00 Time: 1630 Seal Intact? Yes (X) No N/A  
 Relinquished by: Organization: Date: / / Time: Seal Intact? Yes No N/A  
 Received by: Organization: Date: / / Time: Seal Intact? Yes No N/A  
 Special Instructions/Remarks: See Table G-1 in REF. with plan Quality Assurance Plan for test methods - attached. Analyze 0-0.5' depth soil samples for all parameters, hold deeper samples until notified by Affiliator. Results to Ken Brasher - 301-883-7353  
 Delivery Method:  In Person  Common Carrier FedEx  Lab Courier  Other



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page

2 of 5

Project Number/Name C000047001  
 Project Location Enclave Corporate Center TX  
 Laboratory ARCADIS Enclave Bldg. UT  
 Project Manager Ben Brumback  
 Sampler(s)/Affiliation BAH / ARCADIS

ANALYSIS / METHOD / SIZE

TOTAL Sp. B. B. 85  
 Cd, Cr, Co, Cu, CN, Pb  
 TI, Sn, V, Zn  
 18 or greater for  
 W/retention time for

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
B52 (0-0.5)	S	10/15/10 1010			1
B52 (2-2.5)		1013		HOLD	1
B52 (5.5)		1017		HOLD	1
B52 (8.5)		1024		HOLD	1
B52 (11.5)		1034		HOLD	1
<del>B52 (14.5)</del>		<del>1040</del>			
B52 (14.5-15)		1040		HOLD	1
B69 (0-0.5)		1100			1
B69 (2-2.5)		103		HOLD	1
B69 (5.5)		1107		HOLD	1
B69 (8.5)		1115		HOLD	1
B69 (11.5)		1120		HOLD	1
B69 (14.5)		1125		HOLD	1
B69 (15.5-16)	S	V 1130		HOLD	1

Sample Matrix: L = Liquid; S = Solid; A = Air

Total No. of Bottles/Containers 13

Relinquished by: Ben Brumback Organization: ARCADIS Date: 6/15/10 Time: 1810 Seal Intact? Yes  
 Received by: Flatten Organization: ARCADIS Date: 6/16/10 Time: 1130 Seal Intact? N/A  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: See Suppl

Delivery Method:  In Person  Common Carrier  Lab Courier  Other



ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 3 of 5

Project Number/Name CC00002-0001  
 Project Location Enclave Campus Christi, TX  
 Laboratory ASAPLO Salt Lake City, UT  
 Project Manager Kevin Brandner  
 Sampler(s)/Affiliation BH / ARCADIS

ANALYSIS / METHOD / SIZE  
 (8 oz glass jar)  
 (1/4 pint jar)  
 (1/2 pint jar)  
 (1 pint jar)  
 (2 pint jar)  
 (4 pint jar)  
 (8 pint jar)  
 (16 pint jar)  
 (32 pint jar)  
 (64 pint jar)  
 (128 pint jar)  
 (256 pint jar)  
 (512 pint jar)  
 (1024 pint jar)  
 (2048 pint jar)  
 (4096 pint jar)  
 (8192 pint jar)  
 (16384 pint jar)  
 (32768 pint jar)  
 (65536 pint jar)  
 (131072 pint jar)  
 (262144 pint jar)  
 (524288 pint jar)  
 (1048576 pint jar)  
 (2097152 pint jar)  
 (4194304 pint jar)  
 (8388608 pint jar)  
 (16777216 pint jar)  
 (33554432 pint jar)  
 (67108864 pint jar)  
 (134217728 pint jar)  
 (268435456 pint jar)  
 (536870912 pint jar)  
 (1073741824 pint jar)  
 (2147483648 pint jar)  
 (4294967296 pint jar)  
 (8589934592 pint jar)  
 (17179869184 pint jar)  
 (34359738368 pint jar)  
 (68719476736 pint jar)  
 (137438953472 pint jar)  
 (274877906944 pint jar)  
 (549755813888 pint jar)  
 (1099511627776 pint jar)  
 (2199023255552 pint jar)  
 (4398046511104 pint jar)  
 (8796093022208 pint jar)  
 (17592186044416 pint jar)  
 (35184372088832 pint jar)  
 (70368744177664 pint jar)  
 (140737488355328 pint jar)  
 (281474976710656 pint jar)  
 (562949953421312 pint jar)  
 (1125899906842624 pint jar)  
 (2251799813685248 pint jar)  
 (4503599627370496 pint jar)  
 (9007199254740992 pint jar)  
 (18014398509481984 pint jar)  
 (36028797018963968 pint jar)  
 (72057594037927936 pint jar)  
 (144115188075855872 pint jar)  
 (288230376151711744 pint jar)  
 (576460752303423488 pint jar)  
 (1152921504606846976 pint jar)  
 (2305843009213693952 pint jar)  
 (4611686018427387904 pint jar)  
 (9223372036854775808 pint jar)  
 (18446744073709551616 pint jar)  
 (36893488147419103232 pint jar)  
 (73786976294838206464 pint jar)  
 (147573952589676412928 pint jar)  
 (295147905179352825856 pint jar)  
 (590295810358705651712 pint jar)  
 (1180591620717411303424 pint jar)  
 (2361183241434822606848 pint jar)  
 (4722366482869645213696 pint jar)  
 (9444732965739290427392 pint jar)  
 (18889465931478580854784 pint jar)  
 (37778931862957161709568 pint jar)  
 (75557863725914323419136 pint jar)  
 (151115727451828646838272 pint jar)  
 (302231454903657293676544 pint jar)  
 (604462909807314587353088 pint jar)  
 (1208925819614629174706176 pint jar)  
 (2417851639229258349412352 pint jar)  
 (4835703278458516698824704 pint jar)  
 (9671406556917033397649408 pint jar)  
 (19342813113834066795298816 pint jar)  
 (38685626227668133590597632 pint jar)  
 (77371252455336267181195264 pint jar)  
 (154742504910672534362390528 pint jar)  
 (309485009821345068724781056 pint jar)  
 (618970019642690137449562112 pint jar)  
 (1237940039285380274899124224 pint jar)  
 (2475880078570760549798248448 pint jar)  
 (4951760157141521099596496896 pint jar)  
 (9903520314283042199192993792 pint jar)  
 (19807040628566084398385987584 pint jar)  
 (39614081257132168796771975168 pint jar)  
 (79228162514264337593543950336 pint jar)  
 (158456325028528675187087900672 pint jar)  
 (316912650057057350374175801344 pint jar)  
 (633825300114114700748351602688 pint jar)  
 (1267650600228229401496703205376 pint jar)  
 (2535301200456458802993406410752 pint jar)  
 (5070602400912917605986812821504 pint jar)  
 (10141204801825835211973625643008 pint jar)  
 (20282409603651670423947251286016 pint jar)  
 (40564819207303340847894502572032 pint jar)  
 (81129638414606681695789005144064 pint jar)  
 (162259276829213363911578010288128 pint jar)  
 (324518553658426727823156020576256 pint jar)  
 (649037107316853455646312041152512 pint jar)  
 (1298074214633706911292624082305024 pint jar)  
 (2596148429267413822585248164610048 pint jar)  
 (5192296858534827645170496329220096 pint jar)  
 (10384593717069655290340992658440192 pint jar)  
 (2076918743413931058068198531688384 pint jar)  
 (4153837486827862116136397063376768 pint jar)  
 (8307674973655724232272794126753536 pint jar)  
 (166153499473114484645455882535072 pint jar)  
 (332306998946228969290911765070144 pint jar)  
 (664613997892457938581823530140288 pint jar)  
 (1329227995784915877163647060280576 pint jar)  
 (2658455991569831754327294120561152 pint jar)  
 (5316911983139663508654588241122304 pint jar)  
 (10633823966279327017309176482244608 pint jar)  
 (21267647932558654034618352964489216 pint jar)  
 (42535295865117308069236705928978432 pint jar)  
 (85070591730234616138473411857956864 pint jar)  
 (170141183460469232276946823715913728 pint jar)  
 (340282366920938464553893647431827456 pint jar)  
 (680564733841876929107787294863654912 pint jar)  
 (1361129467683753858215575589727309824 pint jar)  
 (2722258935367507716431151179454619648 pint jar)  
 (5444517870735015432862302358909239296 pint jar)  
 (10889035741470030865724604717818478592 pint jar)  
 (21778071482940061731449209435636957184 pint jar)  
 (43556142965880123462898418871273914368 pint jar)  
 (87112285931760246925796837742547828736 pint jar)  
 (17422457186352049385159367548509657472 pint jar)  
 (34844914372704098770318735097019314944 pint jar)  
 (69689828745408197540637470194038629888 pint jar)  
 (139379657490816395081274940388077259776 pint jar)  
 (278759314981632790162549880776154519552 pint jar)  
 (557518629963265580325099761552309031104 pint jar)  
 (1115037259926531160650199523104618022208 pint jar)  
 (2230074519853062321300399046209236044416 pint jar)  
 (4460149039706124642600798092418472088832 pint jar)  
 (8920298079412249285201596184836944177764 pint jar)  
 (1784059615882449857040319369767388835552 pint jar)  
 (3568119231764899714080638739534777711104 pint jar)  
 (7136238463529799428161277479069554422208 pint jar)  
 (14272476927059598856322554958139108444416 pint jar)  
 (28544953854119197712645109916278208888832 pint jar)  
 (57089907708238395425290219832556417777664 pint jar)  
 (1141798154164767908505804396651129355552 pint jar)  
 (22835963083295358170116087933022587111104 pint jar)  
 (4567192616659071634023217586604517422208 pint jar)  
 (9134385233318143268046435173209034844416 pint jar)  
 (18268770466636286536092870346418069688832 pint jar)  
 (36537540933272573072185706692836139377664 pint jar)  
 (7307508186654514614437141338567227875552 pint jar)  
 (14615016373309029228874282677134557511104 pint jar)  
 (2923003274661805845774856535426911422208 pint jar)  
 (5846006549323611691549713070853822844416 pint jar)  
 (11692013098647223383099426141707645688832 pint jar)  
 (233840261972944467661988522834152913777664 pint jar)  
 (4676805239458889353239770456683058275552 pint jar)  
 (9353610478917778706479540913366116511104 pint jar)  
 (1870722095783555741295908182673223222208 pint jar)  
 (374144419156711148259181636534644644416 pint jar)  
 (7482888383134222965183632730692892888832 pint jar)  
 (14965776766268449330367265461385785777664 pint jar)  
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 (1197262141301475946429381237110862222208 pint jar)  
 (23945242826029518928587624742216444416 pint jar)  
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 (76624777043294460571480399175062222208 pint jar)  
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 (490398573077084547657473547200398222208 pint jar)  
 (98079714615416909531494709440079644416 pint jar)  
 (1961594292288338190629994188801592888832 pint jar)  
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 (627710173532268221001598204416522844416 pint jar)  
 (125542034706453644200319640883044888832 pint jar)  
 (251084069412907288400639281767089777664 pint jar)  
 (50216813882581457680127856353417955552 pint jar)  
 (1004336277651629153602557127068359111104 pint jar)  
 (2008672555303258307205114254136718222208 pint jar)  
 (401734511060651661441022850827343444416 pint jar)  
 (803469022121303322882045701654686888832 pint jar)  
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 (822752278652214500231135164894399022208 pint jar)  
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 (26328072916870864007396325276606222208 pint jar)  
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 (42124916666974182518341320441699555552 pint jar)  
 (84249833333948365036682640883199111104 pint jar)  
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 (1347997333423173840586922544109777664 pint jar)  
 (2695994666846347681173845088219555552 pint jar)  
 (539198933369269536234769017643111104 pint jar)  
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 (4313591469538156289878132131224888832 pint jar)  
 (8627182939076312579756264262449777664 pint jar)  
 (172543658781526251595125285249555552 pint jar)  
 (345087317563052503190250570499111104 pint jar)  
 (690174635126105006380501140998222208 pint jar)  
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 (1766847065922828816340813695980888832 pint jar)  
 (3533694131845657632681627391961777664 pint jar)  
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 (1413477652738263053072650956784711104 pint jar)  
 (282695530547652610614530191357422208 pint jar)  
 (5653910610953052212290603827148444416 pint jar)  
 (11307821221906104424581207654296888832 pint jar)  
 (2261564244381220884916401530859377664 pint jar)  
 (4523128488762441769832803061718755552 pint jar)  
 (904625697752488353966560612343711104 pint jar)  
 (1809251395504976707933121224687422208 pint jar)  
 (3618502791009953415866242449374844416 pint jar)  
 (72370055820199068317324848987496888832 pint jar)  
 (1447401116403981366346496979749911104 pint jar)  
 (2894802232807962732692993959499822208 pint jar)  
 (5789604465615925465385987918998444416 pint jar)  
 (115792089312318509307719758379968888832 pint jar)  
 (2315841786246370186154395167599377664 pint jar)  
 (46316835724927403723087903351987555552 pint jar)  
 (9263367144985480744617580670397511104 pint jar)  
 (1852673428997096148923516340795222208 pint jar)  
 (3705346857994192297847032681590444416 pint jar)  
 (74106937159883845956940653631808888832 pint jar)  
 (1482138743997676919138812726361777664 pint jar)  
 (2964277487995353838277625452723555552 pint jar)  
 (592855497599070767655525110544711104 pint jar)  
 (1185710995198141535311102211088888832 pint jar)  
 (23714219903962830706222422217777664 pint jar)  
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 (18971375923170264564977937764222208 pint jar)  
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 (151771007385362116519823502113777664 pint jar)  
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 (242833611816579386431717603380444416 pint jar)  
 (4856672236331587728634352067608888832 pint jar)  
 (971334447266317545726870413521777664 pint jar)  
 (1942668914532635091453740827043555552 pint jar)  
 (388533782906527018290748165408711104 pint jar)  
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 (1554135131626108071162982616348444416 pint jar)  
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 (621654052650443228465193046539377664 pint jar)  
 (12433081053008864569303860930787555552 pint jar)  
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 (497323242120354582772154437231422208 pint jar)  
 (994646484240709165544308874462844416 pint jar)  
 (19892929684814183310886176889256888832 pint jar)  
 (3978585936962836662177235377851377664 pint jar)  
 (79571718739256733243544707557027555552 pint jar)  
 (15914343747851346648708941511405511104 pint jar)  
 (31828687495702693297417883022811022208 pint jar)  
 (6365737499140538659483576045622444416 pint jar)  
 (127314749982810773189671520912448888832 pint jar)  
 (254629499965621546379343041824977664 pint jar)  
 (5092589999312430927586860836499555552 pint jar)  
 (101851799986248618551737217299911104 pint jar)  
 (203703599972497237103474434599822208 pint jar)  
 (4074071999449944742069488691996444416 pint jar)  
 (81481439988998894841389738839928888832 pint jar)  
 (1629628799779977976227794776798577664 pint jar)  
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 (651851519911991190491117910719422208 pint jar)  
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 (26074060796479676019644716427768888832 pint jar)  
 (521481215929593520392894328555377664 pint jar)  
 (10429624317591870407857886571115555552 pint jar)  
 (208592486351837408157157731422311104 pint jar)  
 (417184972703674816314315462844622208 pint jar)  
 (8343699454073496326286







September 19, 2000

Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (49), forty nine soil samples collected between June 23, and June 27 , 2000 in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 27 and June 28, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,

A handwritten signature in black ink, appearing to read "Adil Harami", is written over the typed name. The signature is fluid and cursive, extending across the width of the typed name and slightly beyond.

Adil Harami

Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000983

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000983-001	23-JUN-00	B48 (0-0.5)	AG	1.	ppm	MDK	10-AUG-00		6010
			AS	<5.	ppm	MDK	10-AUG-00		6010
			BA	561.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	27.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	10-AUG-00		6010
			CR	25.*	ppm	MDK	10-AUG-00		6010
			CU	16.	ppm	MDK	10-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	361.	ppm	MDK	10-AUG-00		6010
			MOIST.	21.	%	MJF	12-JUL-00		GRAV.
			NI	14.	ppm	MDK	10-AUG-00		6010
			PB	20.	ppm	MDK	10-AUG-00		6010
			SB	3.	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	34.	ppm	MDK	10-AUG-00		6010
			ZN	1560.	ppm	MDK	10-AUG-00		6010
L000983-002	23-JUN-00	B106 (0-0.5)	AG	5.	ppm	MDK	10-AUG-00		6010
			AS	42.	ppm	MDK	10-AUG-00		6010
			BA	159.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	99.	ppm	MDK	10-AUG-00		6010
			CN-	0.18	ppm	DC	06-JUL-00		335.2
			CO	10.	ppm	MDK	10-AUG-00		6010
			CR	29.*	ppm	MDK	10-AUG-00		6010
			CU	321.	ppm	MDK	10-AUG-00		6010
			HG	0.19*	ppm	EH	12-JUL-00		7471
			MN	911.	ppm	MDK	10-AUG-00		6010
			MOIST.	16.	%	MJF	12-JUL-00		GRAV.
			NI	18.	ppm	MDK	10-AUG-00		6010
			PB	391.	ppm	MDK	10-AUG-00		6010
			SB	8.	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	9.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000983

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000983-002	23-JUN-00	B106 (0-0.5)	V	13.	ppm	MDK	10-AUG-00	6010	
			ZN	7268.	ppm	MDK	10-AUG-00	6010	
L000983-003	23-JUN-00	B105 (0-0.5)	AG	182.	ppm	MDK	10-AUG-00	6010	
			AS	1310.	ppm	MDK	10-AUG-00	6010	
			BA	95.	ppm	MDK	10-AUG-00	6010	
			BI	75.	ppm	MDK	10-AUG-00	6010	
			CD	1077.	ppm	MDK	10-AUG-00	6010	
			CN-	0.56	ppm	DC	06-JUL-00	335.2	
			CO	13.	ppm	MDK	10-AUG-00	6010	
			CR	33.*	ppm	MDK	10-AUG-00	6010	
			CU	1151.	ppm	MDK	10-AUG-00	6010	
			HG	6.2*	ppm	EH	13-JUL-00	7471	
			MN	2294.	ppm	MDK	10-AUG-00	6010	
			MOIST.	16.	%	MJF	12-JUL-00	GRAV.	
			NI	11.	ppm	MDK	10-AUG-00	6010	
			PB	13160.	ppm	MDK	10-AUG-00	6010	
			SB	404.	ppm	MDK	10-AUG-00	6010	
			SE	4.	ppm	MDK	10-AUG-00	6010	
			SN	75.	ppm	MDK	10-AUG-00	6010	
			TL	<1.	ppm	MDK	10-AUG-00	6010	
			V	<5.	ppm	MDK	10-AUG-00	6010	
			ZN	239900.	ppm	MDK	16-SEP-00	6010	
L000983-004	23-JUN-00	B107 (0-0.5)	AG	13.	ppm	MDK	10-AUG-00	6010	
			AS	44.	ppm	MDK	10-AUG-00	6010	
			BA	155.	ppm	MDK	10-AUG-00	6010	
			BI	<4.	ppm	MDK	10-AUG-00	6010	
			CD	99.	ppm	MDK	10-AUG-00	6010	
			CN-	0.11	ppm	DC	06-JUL-00	335.2	
			CO	7.	ppm	MDK	10-AUG-00	6010	
			CR	18.*	ppm	MDK	10-AUG-00	6010	
			CU	346.	ppm	MDK	10-AUG-00	6010	
			HG	0.24*	ppm	EH	12-JUL-00	7471	
			MN	812.	ppm	MDK	10-AUG-00	6010	
			MOIST.	16.	%	MJF	12-JUL-00	GRAV.	
			NI	12.	ppm	MDK	10-AUG-00	6010	
			PB	685.	ppm	MDK	10-AUG-00	6010	
			SB	13.	ppm	MDK	10-AUG-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000983

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000983-004	23-JUN-00	B107 (0-0-5)	SE	2.	ppm	MDK	10-AUG-00		6010			
			SN	6.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	19.	ppm	MDK	10-AUG-00		6010			
			ZN	7579.	ppm	MDK	10-AUG-00		6010			
			AG	3.	ppm	MDK	10-AUG-00		6010			
			AS	<5.	ppm	MDK	10-AUG-00		6010			
			BA	236.	ppm	MDK	10-AUG-00		6010			
			BI	<4.	ppm	MDK	10-AUG-00		6010			
			CD	9.	ppm	MDK	10-AUG-00		6010			
L000983-005	23-JUN-00	B117 (0-0-5)	CN-	<0.04	ppm	DC	06-JUL-00	335.2				
			CO	<5.	ppm	MDK	10-AUG-00		6010			
			CR	15.*	ppm	MDK	10-AUG-00		6010			
			CU	41.	ppm	MDK	10-AUG-00		6010			
			HG	<0.05*	ppm	EH	12-JUL-00		7471			
			MN	153.	ppm	MDK	10-AUG-00		6010			
			MOIST.	11.	%	MJF	12-JUL-00		GRAV.			
			NI	8.	ppm	MDK	10-AUG-00		6010			
			PB	100.	ppm	MDK	10-AUG-00		6010			
			SB	4.	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	22.	ppm	MDK	10-AUG-00		6010			
			ZN	731.	ppm	MDK	10-AUG-00		6010			
			L000983-006	23-JUN-00	B117 (2-2-5)	AG	1.	ppm	MDK	10-AUG-00		6010
						AS	7.	ppm	MDK	10-AUG-00		6010
BA	219.	ppm				MDK	10-AUG-00		6010			
BI	<4.	ppm				MDK	10-AUG-00		6010			
CD	35.	ppm				MDK	10-AUG-00		6010			
CN-	0.11	ppm				DC	06-JUL-00		335.2			
CO	7.	ppm				MDK	10-AUG-00		6010			
CR	19.*	ppm				MDK	10-AUG-00		6010			
CU	46.	ppm				MDK	10-AUG-00		6010			
HG	0.19*	ppm				EH	12-JUL-00		7471			
MN	450.	ppm				MDK	10-AUG-00		6010			
MOIST.	17.	%				MJF	12-JUL-00		GRAV.			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycycle/Texas

Technical Services (Project 8201)

Batch No: L000983

LAR NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000983-006	23-JUN-00	B117 (2-2.5)	NI	12.	ppm	MDK	10-AUG-00		6010
			PB	73.	ppm	MDK	10-AUG-00		6010
			SB	4.	ppm	MDK	10-AUG-00		6010
			SE	2.	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	24.	ppm	MDK	10-AUG-00		6010
			ZN	5054.	ppm	MDK	10-AUG-00		6010
			AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	5.	ppm	MDK	10-AUG-00		6010
			BA	473.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
L000983-007	23-JUN-00	B117 (5.5)	CO	6.	ppm	MDK	10-AUG-00		6010
			CR	19.*	ppm	MDK	10-AUG-00		6010
			CU	11.	ppm	MDK	10-AUG-00		6010
			HC	<0.05*	ppm	EH	12-JUL-00		7471
			MN	333.	ppm	MDK	10-AUG-00		6010
			MOIST.	19.	‡	MJF	12-JUL-00		GRAV.
			NI	17.	ppm	MDK	10-AUG-00		6010
			PB	12.	ppm	MDK	10-AUG-00		6010
			SB	3.	ppm	MDK	10-AUG-00		6010
			SE	<0.8	ppm	MDK	10-AUG-00		6010
			SN	<5.	ppm	MDK	10-AUG-00		6010
			TL	<1.	ppm	MDK	10-AUG-00		6010
			V	44.	ppm	MDK	10-AUG-00		6010
			ZN	125.	ppm	MDK	10-AUG-00		6010
L000983-008	23-JUN-00	B117 (8.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
			AS	6.	ppm	MDK	10-AUG-00		6010
			BA	374.	ppm	MDK	10-AUG-00		6010
			BI	<4.	ppm	MDK	10-AUG-00		6010
			CD	<1.	ppm	MDK	10-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	7.	ppm	MDK	10-AUG-00		6010
			CR	16.*	ppm	MDK	10-AUG-00		6010
			CU	8.	ppm	MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L000983

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000983-008	23-JUN-00	B117 (8.5)	HG	<0.05*	ppm	EH	12-JUL-00		7471			
			MN	353.	ppm	MDK	10-AUG-00		6010			
			MOIST.	16.	%	MJF	12-JUL-00		GRAV.			
			NI	10.	ppm	MDK	10-AUG-00		6010			
			PB	10.	ppm	MDK	10-AUG-00		6010			
			SB	3.	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	40.	ppm	MDK	10-AUG-00		6010			
			ZN	57.	ppm	MDK	10-AUG-00		6010			
			L000983-009	23-JUN-00	B117 (11.5)	AG	<0.5	ppm	MDK	10-AUG-00		6010
						AS	8.	ppm	MDK	10-AUG-00		6010
						BA	273.	ppm	MDK	10-AUG-00		6010
						BI	<4.	ppm	MDK	10-AUG-00		6010
						CD	<1.	ppm	MDK	10-AUG-00		6010
						CN-	<0.04	ppm	DC	06-JUL-00		335.2
CO	9.	ppm				MDK	10-AUG-00		6010			
CR	18.*	ppm				MDK	10-AUG-00		6010			
CU	11.	ppm				MDK	10-AUG-00		6010			
HG	<0.05*	ppm				EH	12-JUL-00		7471			
MN	511.	ppm				MDK	10-AUG-00		6010			
MOIST.	19.	%				MJF	12-JUL-00		GRAV.			
NI	14.	ppm				MDK	10-AUG-00		6010			
PB	12.	ppm				MDK	10-AUG-00		6010			
SB	3.	ppm				MDK	10-AUG-00		6010			
SE	<0.8	ppm				MDK	10-AUG-00		6010			
SN	<5.	ppm				MDK	10-AUG-00		6010			
TL	<1.	ppm	MDK	10-AUG-00		6010						
V	39.	ppm	MDK	10-AUG-00		6010						
ZN	66.	ppm	MDK	10-AUG-00		6010						
L000983-010	23-JUN-00	B117 (14-15)	AG	<0.5	ppm	MDK	10-AUG-00		6010			
			AS	<5.	ppm	MDK	10-AUG-00		6010			
			BA	292.	ppm	MDK	10-AUG-00		6010			
			BI	<4.	ppm	MDK	10-AUG-00		6010			
			CD	<1.	ppm	MDK	10-AUG-00		6010			
			CN-	<0.04	ppm	DC	06-JUL-00		335.2			

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L000983-010	23-JUN-00	B117 (14-15)	CO	6.	ppm	MDK	10-AUG-00		6010			
			CR	9.*	ppm	MDK	10-AUG-00		6010			
			CU	7.	ppm	MDK	10-AUG-00		6010			
			HG	<0.05*	ppm	EH	12-JUL-00		7471			
			MN	334.	ppm	MDK	10-AUG-00		6010			
			MOIST.	19.	%	MJF	12-JUL-00		GRAV.			
			NI	7.	ppm	MDK	10-AUG-00		6010			
			PB	9.	ppm	MDK	10-AUG-00		6010			
			SB	3.	ppm	MDK	10-AUG-00		6010			
			SE	<0.8	ppm	MDK	10-AUG-00		6010			
			SN	<5.	ppm	MDK	10-AUG-00		6010			
			TL	<1.	ppm	MDK	10-AUG-00		6010			
			V	22.	ppm	MDK	10-AUG-00		6010			
			ZN	37.	ppm	MDK	10-AUG-00		6010			
			L000983-011	23-JUN-00	DUPLICATE 26 (0-0.5)	AG	6.	ppm	MDK	10-AUG-00		6010
						AS	51.	ppm	MDK	10-AUG-00		6010
						BA	163.	ppm	MDK	10-AUG-00		6010
						BI	<4.	ppm	MDK	10-AUG-00		6010
						CD	106.	ppm	MDK	10-AUG-00		6010
						CN-	0.14	ppm	DC	06-JUL-00		335.2
						CO	10.	ppm	MDK	10-AUG-00		6010
						CR	22.*	ppm	MDK	10-AUG-00		6010
						CU	372.	ppm	MDK	10-AUG-00		6010
HG	0.54*	ppm				EH	13-JUL-00		7471			
MN	1100.	ppm				MDK	10-AUG-00		6010			
MOIST.	16.	%				MJF	12-JUL-00		GRAV.			
NI	19.	ppm				MDK	10-AUG-00		6010			
PB	445.	ppm				MDK	10-AUG-00		6010			
SB	10.	ppm				MDK	10-AUG-00		6010			
SE	1.	ppm				MDK	10-AUG-00		6010			
SN	10.	ppm				MDK	10-AUG-00		6010			
TL	4.	ppm				MDK	10-AUG-00		6010			
V	18.	ppm				MDK	10-AUG-00		6010			
ZN	7541.	ppm				MDK	10-AUG-00		6010			
L000983-012	23-JUN-00	DUPLICATE 27 (0-0.5)				AG	6.	ppm	MDK	10-AUG-00		6010
						AS	19.	ppm	MDK	10-AUG-00		6010
						BA	171.	ppm	MDK	10-AUG-00		6010

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L000983-012	23-JUN-00	DUPLICATE 27 (0-0.5)	BI	<4.	ppm	MDK	10-AUG-00	6010	
			CD	109.	ppm	MDK	10-AUG-00	6010	
			CN-	0.04	ppm	DC	06-JUL-00	335.2	
			CO	8.	ppm	MDK	10-AUG-00	6010	
			CR	12.*	ppm	MDK	10-AUG-00	6010	
			CU	184.	ppm	MDK	10-AUG-00	6010	
			HG	0.58*	ppm	EH	13-JUL-00	7471	
			MN	764.	ppm	MDK	10-AUG-00	6010	
			MOIST.	16.	%	MJF	12-JUL-00	GRAV.	
			NI	10.	ppm	MDK	10-AUG-00	6010	
			PB	350.	ppm	MDK	10-AUG-00	6010	
			SB	6.	ppm	MDK	10-AUG-00	6010	
			SE	2.	ppm	MDK	10-AUG-00	6010	
			SN	7.	ppm	MDK	10-AUG-00	6010	
			TL	4.	ppm	MDK	10-AUG-00	6010	
			V	16.	ppm	MDK	10-AUG-00	6010	
			ZN	6467.	ppm	MDK	10-AUG-00	6010	
L000983-013	23-JUN-00	DUPLICATE 28 (0-0.5)	AG	<0.5	ppm	MDK	11-AUG-00	6010	
			AS	<5.	ppm	MDK	11-AUG-00	6010	
			BA	274.	ppm	MDK	11-AUG-00	6010	
			BI	<4.	ppm	MDK	11-AUG-00	6010	
			CD	1.	ppm	MDK	11-AUG-00	6010	
			CN-	<0.04	ppm	DC	06-JUL-00	335.2	
			CO	<5.	ppm	MDK	11-AUG-00	6010	
			CR	11.*	ppm	MDK	11-AUG-00	6010	
			CU	8.	ppm	MDK	11-AUG-00	6010	
			HG	<0.05*	ppm	EH	12-JUL-00	7471	
			MN	302.	ppm	MDK	11-AUG-00	6010	
			MOIST.	19.	%	MJF	12-JUL-00	GRAV.	
			NI	7.	ppm	MDK	11-AUG-00	6010	
			PB	11.	ppm	MDK	11-AUG-00	6010	
			SB	3.	ppm	MDK	11-AUG-00	6010	
			SE	<0.8	ppm	MDK	11-AUG-00	6010	
			SN	<5.	ppm	MDK	11-AUG-00	6010	
TL	2.	ppm	MDK	11-AUG-00	6010				
V	25.	ppm	MDK	11-AUG-00	6010				
ZN	95.	ppm	MDK	11-AUG-00	6010				

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L000983-014	23-JUN-00	B95 (0-0.5)	AG	1.	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	88.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	22.	ppm	MDK	11-AUG-00		6010
			CN-	0.06	ppm	DC	06-JUL-00		335.2
			CO	8.	ppm	MDK	11-AUG-00		6010
			CR	12.*	ppm	MDK	11-AUG-00		6010
			CU	30.	ppm	MDK	11-AUG-00		6010
			HG	0.07*	ppm	EH	12-JUL-00		7471
			MN	310.	ppm	MDK	11-AUG-00		6010
			MOIST.	21.	%	MJF	12-JUL-00		GRAV.
			NI	25.	ppm	MDK	11-AUG-00		6010
			PB	61.	ppm	MDK	11-AUG-00		6010
			SB	4.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	1.	ppm	MDK	11-AUG-00		6010
			V	9.	ppm	MDK	11-AUG-00		6010
			ZN	722.	ppm	MDK	11-AUG-00		6010
			L000983-015	26-JUN-00	B34 (0-0.5)	AG	2.	ppm	MDK
AS	<5.	ppm				MDK	11-AUG-00		6010
BA	249.	ppm				MDK	11-AUG-00		6010
BI	<4.	ppm				MDK	11-AUG-00		6010
CD	426.	ppm				MDK	11-AUG-00		6010
CN-	<0.04	ppm				DC	06-JUL-00		335.2
CO	28.	ppm				MDK	11-AUG-00		6010
CR	77.*	ppm				MDK	11-AUG-00		6010
CU	490.	ppm				MDK	11-AUG-00		6010
HG	0.13*	ppm				EH	12-JUL-00		7471
MN	1490.	ppm				MDK	11-AUG-00		6010
MOIST.	6.9	%				MJF	12-JUL-00		GRAV.
NI	40.	ppm				MDK	11-AUG-00		6010
PB	16.	ppm				MDK	11-AUG-00		6010
SB	3.	ppm				MDK	11-AUG-00		6010
SE	<0.8	ppm	MDK	11-AUG-00		6010			
SN	<5.	ppm	MDK	11-AUG-00		6010			
TL	<1.	ppm	MDK	11-AUG-00		6010			

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L000983-015	26-JUN-00	B34 (0-0.5)	V	13.	ppm	MDK	11-AUG-00		6010
			ZN	16750.	ppm	MDK	16-SEP-00		6010
L000983-016	26-JUN-00	B76 (0-0.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	215.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	23.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	11-AUG-00		6010
			CR	32.*	ppm	MDK	11-AUG-00		6010
			CU	30.	ppm	MDK	11-AUG-00		6010
			HG	0.09*	ppm	EH	12-JUL-00		7471
			MN	466.	ppm	MDK	11-AUG-00		6010
			MOIST.	16.	%	MJF	12-JUL-00		GRAV.
			NI	18.	ppm	MDK	11-AUG-00		6010
			PB	27.	ppm	MDK	11-AUG-00		6010
			SB	4.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	21.	ppm	MDK	11-AUG-00		6010
			ZN	1040.	ppm	MDK	11-AUG-00		6010
L000983-017	26-JUN-00	B75 (0-0.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	56.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	2.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	<5.	ppm	MDK	11-AUG-00		6010
			CR	10.*	ppm	MDK	11-AUG-00		6010
			CU	6.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	159.	ppm	MDK	11-AUG-00		6010
			MOIST.	14.	%	MJF	12-JUL-00		GRAV.
			NI	6.	ppm	MDK	11-AUG-00		6010
			PB	6.	ppm	MDK	11-AUG-00		6010
			SB	3.	ppm	MDK	11-AUG-00		6010

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L000983-017	26-JUN-00	B75 (0-0.5)	SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	2.	ppm	MDK	11-AUG-00		6010
			V	16.	ppm	MDK	11-AUG-00		6010
			ZN	83.	ppm	MDK	11-AUG-00		6010
			AG	3.	ppm	MDK	11-AUG-00		6010
			AS	19.	ppm	MDK	11-AUG-00		6010
			BA	441.	ppm	MDK	11-AUG-00		6010
			BI	7.	ppm	MDK	11-AUG-00		6010
			CD	263.	ppm	MDK	11-AUG-00		6010
L000983-018	26-JUN-00	DUPLICATE 29 (0-0.5)	CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	14.	ppm	MDK	11-AUG-00		6010
			CR	15.*	ppm	MDK	11-AUG-00		6010
			CU	77.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	1934.	ppm	MDK	11-AUG-00		6010
			MOIST.	17.	%	MJF	12-JUL-00		GRAV.
			NI	13.	ppm	MDK	11-AUG-00		6010
			PB	201.	ppm	MDK	11-AUG-00		6010
			SB	6.	ppm	MDK	11-AUG-00		6010
L000983-019	26-JUN-00	DUPLICATE 30 (2-2.5)	SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	18.	ppm	MDK	11-AUG-00		6010
			ZN	47720.	ppm	MDK	16-SEP-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	701.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	3.	ppm	MDK	11-AUG-00		6010
L000983-019	26-JUN-00	DUPLICATE 30 (2-2.5)	CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	11-AUG-00		6010
			CR	12.*	ppm	MDK	11-AUG-00		6010
			CU	7.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	573.	ppm	MDK	11-AUG-00		6010
			MOIST.	13.	%	MJF	12-JUL-00		GRAV.

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L000983-019	26-JUN-00	DUPLICATE 30 (2-2.5)	NI	9.	ppm	MDK	11-AUG-00		6010
			PB	9.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	31.	ppm	MDK	11-AUG-00		6010
			ZN	581.	ppm	MDK	11-AUG-00		6010
			AG	1.	ppm	MDK	11-AUG-00		6010
			AS	6.	ppm	MDK	11-AUG-00		6010
			BA	228.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	166.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
L000983-020	26-JUN-00	B33 (0-0.5)	CO	22.	ppm	MDK	11-AUG-00		6010
			CR	19.*	ppm	MDK	11-AUG-00		6010
			CU	10.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	1440.	ppm	MDK	11-AUG-00		6010
			MOIST.	16.	%	MJF	12-JUL-00		GRAV.
			NI	16.	ppm	MDK	11-AUG-00		6010
			PB	22.	ppm	MDK	11-AUG-00		6010
			SB	2.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	25.	ppm	MDK	11-AUG-00		6010
			ZN	18820.	ppm	MDK	11-AUG-00		6010
L000983-021	26-JUN-00	B115 (0-0.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	147.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	2.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	11-AUG-00		6010
			CR	15.*	ppm	MDK	11-AUG-00		6010
			CU	7.	ppm	MDK	11-AUG-00		6010

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L000983-021	26-JUN-00	B115 (0-0.5)	HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	273.	ppm	MDK	11-AUG-00		6010
			MOIST.	15.	%	MJF	12-JUL-00		GRAV.
			NI	9.	ppm	MDK	11-AUG-00		6010
			PB	9.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	1.	ppm	MDK	11-AUG-00		6010
			V	21.	ppm	MDK	11-AUG-00		6010
			ZN	358.	ppm	MDK	11-AUG-00		6010
L000983-022	26-JUN-00	B115 (2-2.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	314.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	11-AUG-00		6010
			CR	12.*	ppm	MDK	11-AUG-00		6010
			CU	7.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	277.	ppm	MDK	11-AUG-00		6010
			MOIST.	18.	%	MJF	12-JUL-00		GRAV.
			NI	9.	ppm	MDK	11-AUG-00		6010
			PB	9.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	1.	ppm	MDK	11-AUG-00		6010
			V	26.	ppm	MDK	11-AUG-00		6010
			ZN	85.	ppm	MDK	11-AUG-00		6010
L000983-023	26-JUN-00	B115 (5.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	5.	ppm	MDK	11-AUG-00		6010
			BA	360.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2

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L000983-023	26-JUN-00	B115 (5.5)	CO	6.	ppm	MDK	11-AUG-00		6010			
			CR	14.*	ppm	MDK	11-AUG-00		6010			
			CU	7.	ppm	MDK	11-AUG-00		6010			
			HG	<0.05*	ppm	EH	12-JUL-00		7471			
			MN	294.	ppm	MDK	11-AUG-00		6010			
			MOIST.	17.	%	MJF	12-JUL-00		GRAV.			
			NI	9.	ppm	MDK	11-AUG-00		6010			
			PB	8.	ppm	MDK	11-AUG-00		6010			
			SB	<0.8	ppm	MDK	11-AUG-00		6010			
			SE	<0.8	ppm	MDK	11-AUG-00		6010			
			SN	<5.	ppm	MDK	11-AUG-00		6010			
			TL	1.	ppm	MDK	11-AUG-00		6010			
			V	41.	ppm	MDK	11-AUG-00		6010			
			ZN	57.	ppm	MDK	11-AUG-00		6010			
			L000983-024	26-JUN-00	B115 (8.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
						AS	<5.	ppm	MDK	11-AUG-00		6010
						BA	200.	ppm	MDK	11-AUG-00		6010
						BI	<4.	ppm	MDK	11-AUG-00		6010
						CD	<1.	ppm	MDK	11-AUG-00		6010
						CN-	<0.04	ppm	DC	06-JUL-00		335.2
						CO	7.	ppm	MDK	11-AUG-00		6010
						CR	16.*	ppm	MDK	11-AUG-00		6010
						CU	8.	ppm	MDK	11-AUG-00		6010
HG	<0.05*	ppm				EH	12-JUL-00		7471			
MN	361.	ppm				MDK	11-AUG-00		6010			
MOIST.	16.	%				MJF	12-JUL-00		GRAV.			
NI	13.	ppm				MDK	11-AUG-00		6010			
PB	9.	ppm				MDK	11-AUG-00		6010			
SB	<0.8	ppm				MDK	11-AUG-00		6010			
SE	<0.8	ppm				MDK	11-AUG-00		6010			
SN	<5.	ppm				MDK	11-AUG-00		6010			
TL	<1.	ppm				MDK	11-AUG-00		6010			
V	35.	ppm				MDK	11-AUG-00		6010			
ZN	53.	ppm				MDK	11-AUG-00		6010			
L000983-025	26-JUN-00	B115 (11.5)				AG	<0.5	ppm	MDK	11-AUG-00		6010
						AS	<5.	ppm	MDK	11-AUG-00		6010
						BA	274.	ppm	MDK	11-AUG-00		6010

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L000983-025	26-JUN-00	B115 (11.5)	BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	<5.	ppm	MDK	11-AUG-00		6010
			CR	8.*	ppm	MDK	11-AUG-00		6010
			CU	6.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	261.	ppm	MDK	11-AUG-00		6010
			MOIST.	16.	%	MJF	12-JUL-00		GRAV.
			NI	6.	ppm	MDK	11-AUG-00		6010
			PB	6.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	20.	ppm	MDK	11-AUG-00		6010
			ZN	32.	ppm	MDK	11-AUG-00		6010
L000983-026	26-JUN-00	B115 (14-14.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	201.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	<5.	ppm	MDK	11-AUG-00		6010
			CR	5.*	ppm	MDK	11-AUG-00		6010
			CU	<5.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	327.	ppm	MDK	11-AUG-00		6010
			MOIST.	17.	%	MJF	12-JUL-00		GRAV.
			NI	6.	ppm	MDK	11-AUG-00		6010
			PB	6.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	14.	ppm	MDK	11-AUG-00		6010
			ZN	29.	ppm	MDK	11-AUG-00		6010

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L000983-027	27-JUN-00	B93 (0-0.5)	AG	3.	ppm	MDK	11-AUG-00		6010
			AS	6.	ppm	MDK	11-AUG-00		6010
			BA	154.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	105.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	9.	ppm	MDK	11-AUG-00		6010
			CR	23.*	ppm	MDK	11-AUG-00		6010
			CU	78.	ppm	MDK	11-AUG-00		6010
			HG	10.*	ppm	EH	13-JUL-00		7471
			MN	343.	ppm	MDK	11-AUG-00		6010
			MOIST.	16.	%	MJF	12-JUL-00		GRAV.
			NI	22.	ppm	MDK	11-AUG-00		6010
			PB	168.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	18.	ppm	MDK	11-AUG-00		6010
			SN	5.	ppm	MDK	11-AUG-00		6010
			TL	2.	ppm	MDK	11-AUG-00		6010
			V	16.	ppm	MDK	11-AUG-00		6010
			ZN	1430.	ppm	MDK	11-AUG-00		6010
L000983-028	27-JUN-00	B94 (0-0.5)	AG	4.	ppm	MDK	11-AUG-00		6010
			AS	6.	ppm	MDK	11-AUG-00		6010
			BA	86.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	53.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	6.	ppm	MDK	11-AUG-00		6010
			CR	24.*	ppm	MDK	11-AUG-00		6010
			CU	69.	ppm	MDK	11-AUG-00		6010
			HG	0.40*	ppm	EH	13-JUL-00		7471
			MN	147.	ppm	MDK	11-AUG-00		6010
			MOIST.	12.	%	MJF	12-JUL-00		GRAV.
			NI	12.	ppm	MDK	11-AUG-00		6010
			PB	192.	ppm	MDK	11-AUG-00		6010
			SB	1.	ppm	MDK	11-AUG-00		6010
			SE	1.	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	1.	ppm	MDK	11-AUG-00		6010

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L000983-028	27-JUN-00	B94 (0-0.5)	V	10.	ppm	MDK	11-AUG-00		6010
			ZN	3712.	ppm	MDK	11-AUG-00		6010
L000983-029	27-JUN-00	B116 (0-0.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	140.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	6.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	6.	ppm	MDK	11-AUG-00		6010
			CR	18.*	ppm	MDK	11-AUG-00		6010
			CU	8.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	229.	ppm	MDK	11-AUG-00		6010
			MOIST.	12.	%	MJF	12-JUL-00		GRAV.
			NI	11.	ppm	MDK	11-AUG-00		6010
			PB	12.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	17.	ppm	MDK	11-AUG-00		6010
			ZN	178.	ppm	MDK	11-AUG-00		6010
L000983-030	27-JUN-00	B116 (2-2.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	278.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	<5.	ppm	MDK	11-AUG-00		6010
			CR	9.*	ppm	MDK	11-AUG-00		6010
			CU	6.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	237.	ppm	MDK	11-AUG-00		6010
			MOIST.	15.	%	MJF	12-JUL-00		GRAV.
			NI	7.	ppm	MDK	11-AUG-00		6010
			PB	7.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010

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L000983-030	27-JUN-00	B116 (2-2.5)	SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	3.	ppm	MDK	11-AUG-00		6010
			V	18.	ppm	MDK	11-AUG-00		6010
			ZN	32.	ppm	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	6.	ppm	MDK	11-AUG-00		6010
			BA	435.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
L000983-031	27-JUN-00	B116 (5.5)	CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	5.	ppm	MDK	11-AUG-00		6010
			CR	13.*	ppm	MDK	11-AUG-00		6010
			CU	9.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	289.	ppm	MDK	11-AUG-00		6010
			MOIST.	17.	%	MJF	13-JUL-00		GRAV.
			NI	9.	ppm	MDK	11-AUG-00		6010
			PB	8.	ppm	MDK	11-AUG-00		6010
			SB	1.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	8.	ppm	MDK	11-AUG-00		6010
			V	47.	ppm	MDK	11-AUG-00		6010
			ZN	41.	ppm	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	301.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
CD	<1.	ppm	MDK	11-AUG-00		6010			
CN-	<0.04	ppm	DC	08-JUL-00		335.2			
CO	8.	ppm	MDK	11-AUG-00		6010			
CR	17.*	ppm	MDK	11-AUG-00		6010			
CU	8.	ppm	MDK	11-AUG-00		6010			
HG	<0.05*	ppm	EH	12-JUL-00		7471			
MN	366.	ppm	MDK	11-AUG-00		6010			
MOIST.	19.	%	MJF	13-JUL-00		GRAV.			

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L000983-032	27-JUN-00	B116 (8.5)	NI	12.	ppm	MDK	11-AUG-00		6010
			PB	9.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	3.	ppm	MDK	11-AUG-00		6010
			V	39.	ppm	MDK	11-AUG-00		6010
			ZN	55.	ppm	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	8.	ppm	MDK	11-AUG-00		6010
			BA	320.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
CO	10.	ppm	MDK	11-AUG-00		6010			
CR	19.*	ppm	MDK	11-AUG-00		6010			
CU	11.	ppm	MDK	11-AUG-00		6010			
HG	<0.05*	ppm	EH	12-JUL-00		7471			
MN	520.	ppm	MDK	11-AUG-00		6010			
MOIST.	22.	%	MJF	13-JUL-00		GRAV.			
NI	14.	ppm	MDK	11-AUG-00		6010			
PB	12.	ppm	MDK	11-AUG-00		6010			
SB	1.	ppm	MDK	11-AUG-00		6010			
SE	<0.8	ppm	MDK	11-AUG-00		6010			
SN	<5.	ppm	MDK	11-AUG-00		6010			
TL	3.	ppm	MDK	11-AUG-00		6010			
V	41.	ppm	MDK	11-AUG-00		6010			
ZN	67.	ppm	MDK	11-AUG-00		6010			
L000983-034	27-JUN-00	B116 (14.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	10.	ppm	MDK	11-AUG-00		6010
			BA	698.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	8.	ppm	MDK	11-AUG-00		6010
			CR	11.*	ppm	MDK	11-AUG-00		6010
			CU	8.	ppm	MDK	11-AUG-00		6010

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L000983-034	27-JUN-00	B116 (14.5)	HG	<0.05*	ppm	EH	12-JUL-00	7471				
			MN	792.	ppm	MDK	11-AUG-00	6010				
			MOIST.	19.	%	MJF	13-JUL-00	GRAV.				
			NI	10.	ppm	MDK	11-AUG-00	6010				
			PB	9.	ppm	MDK	11-AUG-00	6010				
			SB	<0.8	ppm	MDK	11-AUG-00	6010				
			SE	<0.8	ppm	MDK	11-AUG-00	6010				
			SN	<5.	ppm	MDK	11-AUG-00	6010				
			TL	2.	ppm	MDK	11-AUG-00	6010				
			V	25.	ppm	MDK	11-AUG-00	6010				
			ZN	40.	ppm	MDK	11-AUG-00	6010				
			L000983-035	27-JUN-00	B116 (16.5-17)	AG	<0.5	ppm	MDK	11-AUG-00	6010	
						AS	<5.	ppm	MDK	11-AUG-00	6010	
						BA	169.	ppm	MDK	11-AUG-00	6010	
						BI	<4.	ppm	MDK	11-AUG-00	6010	
						CD	<1.	ppm	MDK	11-AUG-00	6010	
						CN-	<0.04	ppm	DC	08-JUL-00	335.2	
						CO	<5.	ppm	MDK	11-AUG-00	6010	
						CR	8.*	ppm	MDK	11-AUG-00	6010	
CU	<5.	ppm				MDK	11-AUG-00	6010				
HG	<0.05*	ppm				EH	12-JUL-00	7471				
MN	183.	ppm				MDK	11-AUG-00	6010				
MOIST.	15.	%				MJF	13-JUL-00	GRAV.				
NI	6.	ppm				MDK	11-AUG-00	6010				
PB	5.	ppm				MDK	11-AUG-00	6010				
SB	<0.8	ppm				MDK	11-AUG-00	6010				
SE	<0.8	ppm				MDK	11-AUG-00	6010				
SN	<5.	ppm				MDK	11-AUG-00	6010				
TL	1.	ppm				MDK	11-AUG-00	6010				
V	15.	ppm				MDK	11-AUG-00	6010				
ZN	22.	ppm	MDK	11-AUG-00	6010							
L000983-036	27-JUN-00	B112 (0-0.5)	AG	2.	ppm	MDK	11-AUG-00	6010				
			AS	<5.	ppm	MDK	11-AUG-00	6010				
			BA	100.	ppm	MDK	11-AUG-00	6010				
			BI	<4.	ppm	MDK	11-AUG-00	6010				
			CD	4.	ppm	MDK	11-AUG-00	6010				
			CN-	<0.04	ppm	DC	08-JUL-00	335.2				

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L000983-036	27-JUN-00	B112 (0-0.5)	CO	5.	ppm	MDK	11-AUG-00		6010			
			CR	81.*	ppm	MDK	11-AUG-00		6010			
			CU	15.	ppm	MDK	11-AUG-00		6010			
			HG	0.16*	ppm	EH	12-JUL-00		7471			
			MN	190.	ppm	MDK	11-AUG-00		6010			
			MOIST.	2.7	%	MJF	13-JUL-00		GRAV.			
			NI	36.	ppm	MDK	11-AUG-00		6010			
			PB	35.	ppm	MDK	11-AUG-00		6010			
			SB	<0.8	ppm	MDK	11-AUG-00		6010			
			SE	<0.8	ppm	MDK	11-AUG-00		6010			
			SN	<5.	ppm	MDK	11-AUG-00		6010			
			TL	<1.	ppm	MDK	11-AUG-00		6010			
			V	8.	ppm	MDK	11-AUG-00		6010			
			ZN	584.	ppm	MDK	11-AUG-00		6010			
			L000983-037	27-JUN-00	B112 (2-2.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
						AS	<5.	ppm	MDK	11-AUG-00		6010
						BA	449.	ppm	MDK	11-AUG-00		6010
						BI	<4.	ppm	MDK	11-AUG-00		6010
						CD	<1.	ppm	MDK	11-AUG-00		6010
						CN-	<0.04	ppm	DC	08-JUL-00		335.2
CO	6.	ppm				MDK	11-AUG-00		6010			
CR	17.*	ppm				MDK	11-AUG-00		6010			
CU	11.	ppm				MDK	11-AUG-00		6010			
HG	<0.05*	ppm				EH	12-JUL-00		7471			
MN	367.	ppm				MDK	11-AUG-00		6010			
MOIST.	17.	%				MJF	13-JUL-00		GRAV.			
NI	12.	ppm				MDK	11-AUG-00		6010			
PB	9.	ppm				MDK	11-AUG-00		6010			
SB	<0.8	ppm				MDK	11-AUG-00		6010			
SE	<0.8	ppm				MDK	11-AUG-00		6010			
SN	<5.	ppm				MDK	11-AUG-00		6010			
TL	1.	ppm				MDK	11-AUG-00		6010			
V	36.	ppm				MDK	11-AUG-00		6010			
ZN	55.	ppm				MDK	11-AUG-00		6010			
L000983-038	27-JUN-00	B112 (5.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010			
			AS	<5.	ppm	MDK	11-AUG-00		6010			
			BA	384.	ppm	MDK	11-AUG-00		6010			

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L000983-038	27-JUN-00	B112 (5.5)	BI	<4.	ppm	MDK	11-AUG-00		6010			
			CD	<1.	ppm	MDK	11-AUG-00		6010			
			CN-	<0.04	ppm	DC	08-JUL-00		335.2			
			CO	6.	ppm	MDK	11-AUG-00		6010			
			CR	12.*	ppm	MDK	11-AUG-00		6010			
			CU	9.	ppm	MDK	11-AUG-00		6010			
			HG	<0.05*	ppm	EH	12-JUL-00		7471			
			MN	321.	ppm	MDK	11-AUG-00		6010			
			MOIST.	20.	%	MJF	13-JUL-00		GRAV.			
			NI	9.	ppm	MDK	11-AUG-00		6010			
			PB	10.	ppm	MDK	11-AUG-00		6010			
			SB	<0.8	ppm	MDK	11-AUG-00		6010			
			SE	<0.8	ppm	MDK	11-AUG-00		6010			
			SN	<5.	ppm	MDK	11-AUG-00		6010			
			TL	2.	ppm	MDK	11-AUG-00		6010			
			V	34.	ppm	MDK	11-AUG-00		6010			
			ZN	71.	ppm	MDK	11-AUG-00		6010			
			L000983-039	27-JUN-00	B112 (8.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
						AS	<5.	ppm	MDK	11-AUG-00		6010
						BA	311.	ppm	MDK	11-AUG-00		6010
BI	<4.	ppm				MDK	11-AUG-00		6010			
CD	<1.	ppm				MDK	11-AUG-00		6010			
CN-	<0.04	ppm				DC	08-JUL-00		335.2			
CO	6.	ppm				MDK	11-AUG-00		6010			
CR	12.*	ppm				MDK	11-AUG-00		6010			
CU	9.	ppm				MDK	11-AUG-00		6010			
HG	<0.05*	ppm				EH	12-JUL-00		7471			
MN	341.	ppm				MDK	11-AUG-00		6010			
MOIST.	20.	%				MJF	13-JUL-00		GRAV.			
NI	9.	ppm				MDK	11-AUG-00		6010			
PB	15.	ppm				MDK	11-AUG-00		6010			
SB	<0.8	ppm				MDK	11-AUG-00		6010			
SE	<0.8	ppm				MDK	11-AUG-00		6010			
SN	<5.	ppm				MDK	11-AUG-00		6010			
TL	1.	ppm				MDK	11-AUG-00		6010			
V	27.	ppm				MDK	11-AUG-00		6010			
ZN	116.	ppm				MDK	11-AUG-00		6010			

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Encycle/Texas

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L000983-040	27-JUN-00	B112 (11.5)	AG	<0.5	ppm	MDK	11-AUG-00	6010	
			AS	7.	ppm	MDK	11-AUG-00	6010	
			BA	298.	ppm	MDK	11-AUG-00	6010	
			BI	<4.	ppm	MDK	11-AUG-00	6010	
			CD	<1.	ppm	MDK	11-AUG-00	6010	
			CN-	<0.04	ppm	DC	08-JUL-00	335.2	
			CO	8.	ppm	MDK	11-AUG-00	6010	
			CR	14.*	ppm	MDK	11-AUG-00	6010	
			CU	10.	ppm	MDK	11-AUG-00	6010	
			HG	<0.05*	ppm	EH	12-JUL-00	7471	
			MN	420.	ppm	MDK	11-AUG-00	6010	
			MOIST.	19.	%	MJF	13-JUL-00	GRAV.	
			NI	12.	ppm	MDK	11-AUG-00	6010	
			PB	11.	ppm	MDK	11-AUG-00	6010	
			SB	<0.8	ppm	MDK	11-AUG-00	6010	
			SE	<0.8	ppm	MDK	11-AUG-00	6010	
			SN	<5.	ppm	MDK	11-AUG-00	6010	
			TL	1.	ppm	MDK	11-AUG-00	6010	
			V	32.	ppm	MDK	11-AUG-00	6010	
			ZN	58.	ppm	MDK	11-AUG-00	6010	
			L000983-041	27-JUN-00	B112 (14.5)	AG	<0.5	ppm	MDK
AS	8.	ppm				MDK	11-AUG-00	6010	
BA	569.	ppm				MDK	11-AUG-00	6010	
BI	<4.	ppm				MDK	11-AUG-00	6010	
CD	<1.	ppm				MDK	11-AUG-00	6010	
CN-	<0.04	ppm				DC	08-JUL-00	335.2	
CO	9.	ppm				MDK	11-AUG-00	6010	
CR	15.*	ppm				MDK	11-AUG-00	6010	
CU	12.	ppm				MDK	11-AUG-00	6010	
HG	<0.05*	ppm				EH	12-JUL-00	7471	
MN	751.	ppm				MDK	11-AUG-00	6010	
MOIST.	22.	%				MJF	13-JUL-00	GRAV.	
NI	14.	ppm				MDK	11-AUG-00	6010	
PB	13.	ppm				MDK	11-AUG-00	6010	
SB	1.	ppm				MDK	11-AUG-00	6010	
SE	<0.8	ppm				MDK	11-AUG-00	6010	
SN	<5.	ppm				MDK	11-AUG-00	6010	
TL	<1.	ppm				MDK	11-AUG-00	6010	

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L000983-041	27-JUN-00	B112 (14.5)	V	33.	ppm	MDK	11-AUG-00		6010
			ZN	75.	ppm	MDK	11-AUG-00		6010
L000983-042	27-JUN-00	B112 (17.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	7.	ppm	MDK	11-AUG-00		6010
			BA	314.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	7.	ppm	MDK	11-AUG-00		6010
			CR	15.*	ppm	MDK	11-AUG-00		6010
			CU	10.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	424.	ppm	EH	12-JUL-00		7471
			MOIST.	20.	%	MJF	13-JUL-00		GRAV.
			NI	13.	ppm	MDK	11-AUG-00		6010
			PB	11.	ppm	MDK	11-AUG-00		6010
			SB	1.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
SN	<5.	ppm	MDK	11-AUG-00		6010			
TL	<1.	ppm	MDK	11-AUG-00		6010			
V	29.	ppm	MDK	11-AUG-00		6010			
ZN	57.	ppm	MDK	11-AUG-00		6010			
L000983-043	27-JUN-00	B112 (18.5-19)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	111.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	8.	ppm	MDK	11-AUG-00		6010
			CR	24.*	ppm	MDK	11-AUG-00		6010
			CU	<5.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	171.	ppm	MDK	11-AUG-00		6010
			MOIST.	14.	%	MJF	13-JUL-00		GRAV.
			NI	15.	ppm	MDK	11-AUG-00		6010
			PB	<5.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010

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L000983-043	27-JUN-00	B112 (18.5-19)	SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	6.	ppm	MDK	11-AUG-00		6010
			ZN	15.	ppm	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	134.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	129.	ppm	MDK	11-AUG-00		6010
L000983-044	27-JUN-00	B68 (0-0.5)	CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	11.	ppm	MDK	11-AUG-00		6010
			CR	13.*	ppm	MDK	11-AUG-00		6010
			CU	25.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	1528.	ppm	MDK	11-AUG-00		6010
			MOIST.	22.	%	MJF	13-JUL-00		GRAV.
			NI	20.	ppm	MDK	11-AUG-00		6010
			PB	9.	ppm	MDK	11-AUG-00		6010
			SB	2.	ppm	MDK	11-AUG-00		6010
L000983-045	27-JUN-00	DUPLICATE 31 (8.5)	SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	<1.	ppm	MDK	11-AUG-00		6010
			V	18.	ppm	MDK	11-AUG-00		6010
			ZN	40160.	ppm	MDK	16-SEP-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	281.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	1.	ppm	MDK	11-AUG-00		6010
L000983-045	27-JUN-00	DUPLICATE 31 (8.5)	CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	8.	ppm	MDK	11-AUG-00		6010
			CR	15.*	ppm	MDK	11-AUG-00		6010
			CU	9.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	374.	ppm	MDK	11-AUG-00		6010
			MOIST.	19.	%	MJF	13-JUL-00		GRAV.

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LAR NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000983-045	27-JUN-00	DUPLICATE 31 (8.5)	NI	11.	ppm	MDK	11-AUG-00		6010
			PB	10.	ppm	MDK	11-AUG-00		6010
			SB	2.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	2.	ppm	MDK	11-AUG-00		6010
			V	34.	ppm	MDK	11-AUG-00		6010
			ZN	309.	ppm	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	7.	ppm	MDK	11-AUG-00		6010
			BA	288.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
L000983-046	27-JUN-00	DUPLICATE 32 (11.5)	CO	8.	ppm	MDK	11-AUG-00		6010
			CR	18.*	ppm	MDK	11-AUG-00		6010
			CU	10.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	410.	ppm	MDK	11-AUG-00		6010
			MOIST.	25.	‡	MJF	13-JUL-00		GRAV.
			NI	13.	ppm	MDK	11-AUG-00		6010
			PB	11.	ppm	MDK	11-AUG-00		6010
			SB	2.	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	7.	ppm	MDK	11-AUG-00		6010
			V	36.	ppm	MDK	11-AUG-00		6010
			ZN	111.	ppm	MDK	11-AUG-00		6010
L000983-047	27-JUN-00	DUPLICATE 33 (5.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.	ppm	MDK	11-AUG-00		6010
			BA	370.	ppm	MDK	11-AUG-00		6010
			BI	<4.	ppm	MDK	11-AUG-00		6010
			CD	<1.	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	7.	ppm	MDK	11-AUG-00		6010
			CR	18.*	ppm	MDK	11-AUG-00		6010
			CU	9.	ppm	MDK	11-AUG-00		6010

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
L000983-047	27-JUN-00	DUPLICATE 33 (5.5)	HG	<0.05*	ppm	EH	12-JUL-00		7471			
			MN	373.	ppm	MDK	11-AUG-00		6010			
			MOIST.		%	MJF	13-JUL-00		GRAV.			
			NI	11.	ppm	MDK	11-AUG-00		6010			
			PB	11.	ppm	MDK	11-AUG-00		6010			
			SB	1.	ppm	MDK	11-AUG-00		6010			
			SE	<0.8	ppm	MDK	11-AUG-00		6010			
			SN	<5.	ppm	MDK	11-AUG-00		6010			
			TIL	3.	ppm	MDK	11-AUG-00		6010			
			V	47.	ppm	MDK	11-AUG-00		6010			
			ZN	118.	ppm	MDK	11-AUG-00		6010			
			L000983-048	27-JUN-00	B78 (0-0.5)	AG	<0.5	ppm	MDK	11-AUG-00		6010
						AS	<5.	ppm	MDK	11-AUG-00		6010
						BA	122.	ppm	MDK	11-AUG-00		6010
BI	<4.	ppm				MDK	11-AUG-00		6010			
CD	<1.	ppm				MDK	11-AUG-00		6010			
CN-	<0.04	ppm				DC	08-JUL-00		335.2			
CO	6.	ppm				MDK	11-AUG-00		6010			
CR	13.*	ppm				MDK	11-AUG-00		6010			
CU	7.	ppm				MDK	11-AUG-00		6010			
HG	<0.05*	ppm				EH	12-JUL-00		7471			
MN	198.	ppm				MDK	11-AUG-00		6010			
MOIST.		%				MJF	13-JUL-00		GRAV.			
NI	8.	ppm				MDK	11-AUG-00		6010			
PB	19.	ppm				MDK	11-AUG-00		6010			
L000983-049	27-JUN-00	B77 (0-0.5)	SE	<0.8	ppm	MDK	11-AUG-00		6010			
			SN	<5.	ppm	MDK	11-AUG-00		6010			
			TIL	2.	ppm	MDK	11-AUG-00		6010			
			V	14.	ppm	MDK	11-AUG-00		6010			
			ZN	155.	ppm	MDK	11-AUG-00		6010			
			AG	<0.5	ppm	MDK	11-AUG-00		6010			
			AS	<5.	ppm	MDK	11-AUG-00		6010			
			BA	67.	ppm	MDK	11-AUG-00		6010			
			BI	<4.	ppm	MDK	11-AUG-00		6010			
			CD	<1.	ppm	MDK	11-AUG-00		6010			
			CN-	<0.04	ppm	DC	08-JUL-00		335.2			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
L000983-049	27-JUN-00	B77 (0-0.5)	CO	<5.	ppm	MDK	11-AUG-00		6010
			CR	9.*	ppm	MDK	11-AUG-00		6010
			CU	6.	ppm	MDK	11-AUG-00		6010
			HG	<0.05*	ppm	EH	12-JUL-00		7471
			MN	171.	ppm	MDK	11-AUG-00		6010
			MOIST.	14.	%	MJF	13-JUL-00		GRAV.
			NI	6.	ppm	MDK	11-AUG-00		6010
			PB	16.	ppm	MDK	11-AUG-00		6010
			SB	<0.8	ppm	MDK	11-AUG-00		6010
			SE	<0.8	ppm	MDK	11-AUG-00		6010
			SN	<5.	ppm	MDK	11-AUG-00		6010
			TL	3.	ppm	MDK	11-AUG-00		6010
			V	13.	ppm	MDK	11-AUG-00		6010
			ZN	121.	ppm	MDK	11-AUG-00		6010

(\*) Quality control data indicates a possible bias. See QC report for details.

*AKH for VPK*  
 Approved  
*Zed*  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encydie/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	MOID DAYS	METHOD
WG000545-1		Matrix Spike	AG	100	%Recovery	MDK	10-AUG-00		6010
			AS	90	%Recovery	MDK	10-AUG-00		6010
			BA	93	%Recovery	MDK	10-AUG-00		6010
			BI	95	%Recovery	MDK	10-AUG-00		6010
			CD	89	%Recovery	MDK	10-AUG-00		6010
			CN-	92	%Recovery	DC	06-JUL-00		335.2
			CO	93	%Recovery	MDK	10-AUG-00		6010
			CR	98	%Recovery	MDK	10-AUG-00		6010
			CU	110	%Recovery	MDK	10-AUG-00		6010
			HG	83	%Recovery	EH	12-JUL-00		7471
			MN	89	%Recovery	MDK	10-AUG-00		6010
			NI	91	%Recovery	MDK	10-AUG-00		6010
			PB	90	%Recovery	MDK	10-AUG-00		6010
			SB	63*	%Recovery	MDK	10-AUG-00		6010
			SE	76	%Recovery	MDK	10-AUG-00		6010
			SN	91	%Recovery	MDK	10-AUG-00		6010
			TL	82	%Recovery	MDK	10-AUG-00		6010
			V	96	%Recovery	MDK	10-AUG-00		6010
			ZN	88	%Recovery	MDK	10-AUG-00		6010
			WG000545-2		Prep Blank	AG	<0.5	ppm	MDK
AS	<5.0	ppm				MDK	10-AUG-00		6010
BA	<5.0	ppm				MDK	10-AUG-00		6010
BI	<4.0	ppm				MDK	10-AUG-00		6010
CD	<1.0	ppm				MDK	10-AUG-00		6010
CN-	<0.04	ppm				DC	06-JUL-00		335.2
CO	<5.0	ppm				MDK	10-AUG-00		6010
CR	<5.0	ppm				MDK	10-AUG-00		6010
CU	<5.0	ppm				MDK	10-AUG-00		6010
HG	<0.05	ppm				EH	12-JUL-00		7471
MN	<5.0	ppm				MDK	10-AUG-00		6010
NI	<5.0	ppm				MDK	10-AUG-00		6010
PB	<5.0	ppm				MDK	10-AUG-00		6010
SB	<0.80	ppm				MDK	10-AUG-00		6010
SE	<0.80	ppm				MDK	10-AUG-00		6010
SN	<5.0	ppm				MDK	10-AUG-00		6010
TL	<1.0	ppm				MDK	10-AUG-00		6010
V	<5.0	ppm				MDK	10-AUG-00		6010
ZN	<5.0	ppm				MDK	10-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000545-3		Lab Control Sample	AG	99	% Recovery	MDK	10-AUG-00	6010	
			AS	95	% Recovery	MDK	10-AUG-00	6010	
			BA	100	% Recovery	MDK	10-AUG-00	6010	
			BI	94	% Recovery	MDK	10-AUG-00	6010	
			CD	97	% Recovery	MDK	10-AUG-00	6010	
			CN-	88	% Recovery	DC	06-JUL-00	335.2	
			CO	100	% Recovery	MDK	10-AUG-00	6010	
			CR	102	% Recovery	MDK	10-AUG-00	6010	
			CU	106	% Recovery	MDK	10-AUG-00	6010	
			HG	101	% Recovery	EH	12-JUL-00	7471	
			MN	107	% Recovery	MDK	10-AUG-00	6010	
			NI	98	% Recovery	MDK	10-AUG-00	6010	
			PB	96	% Recovery	MDK	10-AUG-00	6010	
			SB	156**	% Recovery	MDK	10-AUG-00	6010	
			SE	83	% Recovery	MDK	10-AUG-00	6010	
			SN	109	% Recovery	MDK	10-AUG-00	6010	
			TL	95	% Recovery	MDK	10-AUG-00	6010	
			V	103	% Recovery	MDK	10-AUG-00	6010	
			ZN	97	% Recovery	MDK	10-AUG-00	6010	
			WG000545-4		Duplicate	MOIST.	1.1	% RPD	MJF
WG000545-5		Matrix Spike Duplicate	AG	2	% RPD	MDK	10-AUG-00	6010	
			AS	1.4	% RPD	MDK	10-AUG-00	6010	
			BA	2.1	% RPD	MDK	10-AUG-00	6010	
			BI	2.4	% RPD	MDK	10-AUG-00	6010	
			CD	1.1	% RPD	MDK	10-AUG-00	6010	
			CN-	4.4	% RPD	DC	06-JUL-00	335.2	
			CO	<1	% RPD	MDK	10-AUG-00	6010	
			CR	1.5	% RPD	MDK	10-AUG-00	6010	
			CU	3.5	% RPD	MDK	10-AUG-00	6010	
			HG	6	% RPD	EH	12-JUL-00	7471	
			MN	3	% RPD	MDK	10-AUG-00	6010	
			NI	1	% RPD	MDK	10-AUG-00	6010	
			PB	<1	% RPD	MDK	10-AUG-00	6010	
			SB	3.1	% RPD	MDK	10-AUG-00	6010	
			SE	1.4	% RPD	MDK	10-AUG-00	6010	
			SN	1.4	% RPD	MDK	10-AUG-00	6010	
			TL	<1	% RPD	MDK	10-AUG-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000545-5		Matrix Spike Duplicate	V	4.2	% RPD	MDK	10-AUG-00		6010
			ZN	4.4	% RPD	MDK	10-AUG-00		6010
			AG	103	%Recovery	MDK	11-AUG-00		6010
			AS	93	%Recovery	MDK	11-AUG-00		6010
			EA	96	%Recovery	MDK	11-AUG-00		6010
			BI	96	%Recovery	MDK	11-AUG-00		6010
			CD	92	%Recovery	MDK	11-AUG-00		6010
			CN-	92	%Recovery	DC	06-JUL-00		335.2
			CO	95	%Recovery	MDK	11-AUG-00		6010
			CR	128*	%Recovery	MDK	11-AUG-00		6010
			CU	116	%Recovery	MDK	11-AUG-00		6010
			HG	129*	%Recovery	EH	12-JUL-00		7471
			MN	96	%Recovery	MDK	11-AUG-00		6010
			NI	99	%Recovery	MDK	11-AUG-00		6010
WG000545-6		Matrix Spike	PB	93	%Recovery	MDK	11-AUG-00		6010
			SB	66*	%Recovery	MDK	11-AUG-00		6010
			SE	79	%Recovery	MDK	11-AUG-00		6010
			SN	94	%Recovery	MDK	11-AUG-00		6010
			TL	84	%Recovery	MDK	11-AUG-00		6010
			V	102	%Recovery	MDK	11-AUG-00		6010
			ZN	98	%Recovery	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.0	ppm	MDK	11-AUG-00		6010
			EA	<5.0	ppm	MDK	11-AUG-00		6010
			BI	<4.0	ppm	MDK	11-AUG-00		6010
			CD	<1.0	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	06-JUL-00		335.2
			CO	<5.0	ppm	MDK	11-AUG-00		6010
CR	<5.0	ppm	MDK	11-AUG-00		6010			
CU	<5.0	ppm	MDK	11-AUG-00		6010			
WG000545-7		Prep Blank	HG	<0.05	ppm	EH	12-JUL-00		7471
			MN	<5.0	ppm	MDK	11-AUG-00		6010
			NI	<5.0	ppm	MDK	11-AUG-00		6010
			PB	<5.0	ppm	MDK	11-AUG-00		6010
			SB	<0.80	ppm	MDK	11-AUG-00		6010
			SE	<0.80	ppm	MDK	11-AUG-00		6010
			SN	<5.0	ppm	MDK	11-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HCID
WG000545-7		Prep Blank	TL	1.9	ppm	MDK	11-AUG-00	6010
			V	<5.0	ppm	MDK	11-AUG-00	6010
			ZN	<5.0	ppm	MDK	11-AUG-00	6010
WG000545-8		Lab Control Sample	AG	102	%Recovery	MDK	11-AUG-00	6010
			AS	99	%Recovery	MDK	11-AUG-00	6010
			BA	101	%Recovery	MDK	11-AUG-00	6010
			BI	93	%Recovery	MDK	11-AUG-00	6010
			CD	99	%Recovery	MDK	11-AUG-00	6010
			CN-	90	%Recovery	DC	06-JUL-00	335.2
			CO	102	%Recovery	MDK	11-AUG-00	6010
			CR	104	%Recovery	MDK	11-AUG-00	6010
			CU	112	%Recovery	MDK	11-AUG-00	6010
			HG	117	%Recovery	EH	12-JUL-00	7471
			MN	106	%Recovery	MDK	11-AUG-00	6010
			NI	102	%Recovery	MDK	11-AUG-00	6010
			PB	96	%Recovery	MDK	11-AUG-00	6010
			SB	150**	%Recovery	MDK	11-AUG-00	6010
			SE	86	%Recovery	MDK	11-AUG-00	6010
			SN	112	%Recovery	MDK	11-AUG-00	6010
			TL	100	%Recovery	MDK	11-AUG-00	6010
V	104	%Recovery	MDK	11-AUG-00	6010			
ZN	98	%Recovery	MDK	11-AUG-00	6010			
WG000545-9		Duplicate	MOIST.	<1	% RPD	MJF	12-JUL-00	GRAV.
WG000545-10		Matrix Spike Duplicate	AG	<1	% RPD	MDK	11-AUG-00	6010
			AS	2.4	% RPD	MDK	11-AUG-00	6010
			BA	2.5	% RPD	MDK	11-AUG-00	6010
			BI	3.1	% RPD	MDK	11-AUG-00	6010
			CD	2.1	% RPD	MDK	11-AUG-00	6010
			CN-	<1	% RPD	DC	08-JUL-00	335.2
			CO	2	% RPD	MDK	11-AUG-00	6010
			CR	1.2	% RPD	MDK	11-AUG-00	6010
			CU	1.5	% RPD	MDK	11-AUG-00	6010
			HG	18	% RPD	EH	12-JUL-00	7471
			MN	3.4	% RPD	MDK	11-AUG-00	6010
			NI	1.3	% RPD	MDK	11-AUG-00	6010
			PB	2.5	% RPD	MDK	11-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000545-10		Matrix Spike Duplicate	SB	4.4	% RPD	MDK	11-AUG-00		6010
			SE	2.3	% RPD	MDK	11-AUG-00		6010
			SN	3.2	% RPD	MDK	11-AUG-00		6010
			TL	4.9	% RPD	MDK	11-AUG-00		6010
			V	1.3	% RPD	MDK	11-AUG-00		6010
			ZN	1.2	% RPD	MDK	11-AUG-00		6010
			AG	102	%Recovery	MDK	11-AUG-00		6010
			AS	92	%Recovery	MDK	11-AUG-00		6010
			BA	94	%Recovery	MDK	11-AUG-00		6010
			BI	96	%Recovery	MDK	11-AUG-00		6010
			CD	92	%Recovery	MDK	11-AUG-00		6010
			CN-	96	%Recovery	DC	08-JUL-00		335.2
WG000545-11		Matrix Spike	CO	93	%Recovery	MDK	11-AUG-00		6010
			CR	99	%Recovery	MDK	11-AUG-00		6010
			CU	115	%Recovery	MDK	11-AUG-00		6010
			HG	107	%Recovery	EH	12-JUL-00		7471
			MN	99	%Recovery	MDK	11-AUG-00		6010
			NI	93	%Recovery	MDK	11-AUG-00		6010
			PB	93	%Recovery	MDK	11-AUG-00		6010
			SB	65*	%Recovery	MDK	11-AUG-00		6010
			SE	78	%Recovery	MDK	11-AUG-00		6010
			SN	94	%Recovery	MDK	11-AUG-00		6010
			TL	82	%Recovery	MDK	11-AUG-00		6010
			V	98	%Recovery	MDK	11-AUG-00		6010
WG000545-12		Prep Blank	ZN	105	%Recovery	MDK	11-AUG-00		6010
			AG	<0.5	ppm	MDK	11-AUG-00		6010
			AS	<5.0	ppm	MDK	11-AUG-00		6010
			BA	<5.0	ppm	MDK	11-AUG-00		6010
			BI	<4.0	ppm	MDK	11-AUG-00		6010
			CD	<1.0	ppm	MDK	11-AUG-00		6010
			CN-	<0.04	ppm	DC	08-JUL-00		335.2
			CO	<5.0	ppm	MDK	11-AUG-00		6010
			CR	<5.0	ppm	MDK	11-AUG-00		6010
			CU	<5.0	ppm	MDK	11-AUG-00		6010
			HG	<0.05	ppm	EH	12-JUL-00		7471
			MN	<5.0	ppm	MDK	11-AUG-00		6010
NI	<5.0	ppm	MDK	11-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000545-12		Prep Blank	PB	<5.0	ppm	MDK	11-AUG-00		6010
			SB	<0.80	ppm	MDK	11-AUG-00		6010
			SE	<0.80	ppm	MDK	11-AUG-00		6010
			SN	<5.0	ppm	MDK	11-AUG-00		6010
			TL	1.8	ppm	MDK	11-AUG-00		6010
			V	<5.0	ppm	MDK	11-AUG-00		6010
			ZN	<5.0	ppm	MDK	11-AUG-00		6010
			AG	101	%Recovery	MDK	11-AUG-00		6010
			AS	101	%Recovery	MDK	11-AUG-00		6010
			BA	104	%Recovery	MDK	11-AUG-00		6010
WG000545-13		Lab Control Sample	BI	93	%Recovery	MDK	11-AUG-00		6010
			CD	101	%Recovery	MDK	11-AUG-00		6010
			CN-	80	%Recovery	DC	08-JUL-00		335.2
			CO	101	%Recovery	MDK	11-AUG-00		6010
			CR	105	%Recovery	MDK	11-AUG-00		6010
			CU	114	%Recovery	MDK	11-AUG-00		6010
			HG	107	%Recovery	EH	12-JUL-00		7471
			MN	109	%Recovery	MDK	11-AUG-00		6010
			NI	103	%Recovery	MDK	11-AUG-00		6010
			PB	99	%Recovery	MDK	11-AUG-00		6010
			SB	149**	%Recovery	MDK	11-AUG-00		6010
			SE	87	%Recovery	MDK	11-AUG-00		6010
			SN	111	%Recovery	MDK	11-AUG-00		6010
			TL	103	%Recovery	MDK	11-AUG-00		6010
			V	107	%Recovery	MDK	11-AUG-00		6010
			ZN	99	%Recovery	MDK	11-AUG-00		6010
			MOIST.	20	% RPD	MJF	13-JUL-00		GRAV.
			WG000545-14		Duplicate	AG	1.6	% RPD	MDK
AS	<1	% RPD				MDK	11-AUG-00		6010
BA	1.8	% RPD				MDK	11-AUG-00		6010
BI	<1	% RPD				MDK	11-AUG-00		6010
CD	<1	% RPD				MDK	11-AUG-00		6010
CN-	4.2	% RPD				DC	08-JUL-00		335.2
CO	<1	% RPD				MDK	11-AUG-00		6010
CR	<1	% RPD				MDK	11-AUG-00		6010
CU	<1	% RPD				MDK	11-AUG-00		6010
WG000545-15		Matrix Spike Duplicate				AG	1.6	% RPD	MDK
			AS	<1	% RPD	MDK	11-AUG-00		6010
			BA	1.8	% RPD	MDK	11-AUG-00		6010
			BI	<1	% RPD	MDK	11-AUG-00		6010
			CD	<1	% RPD	MDK	11-AUG-00		6010
			CN-	4.2	% RPD	DC	08-JUL-00		335.2
			CO	<1	% RPD	MDK	11-AUG-00		6010
			CR	<1	% RPD	MDK	11-AUG-00		6010
			CU	<1	% RPD	MDK	11-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000545-15		Matrix Spike Duplicate	HG	2	% RPD	EH	12-JUL-00		7471
			MN	<1	% RPD	MDK	11-AUG-00		6010
			NI	<1	% RPD	MDK	11-AUG-00		6010
			PB	<1	% RPD	MDK	11-AUG-00		6010
			SB	2.9	% RPD	MDK	11-AUG-00		6010
			SE	<1	% RPD	MDK	11-AUG-00		6010
			SN	<1	% RPD	MDK	11-AUG-00		6010
			TL	2	% RPD	MDK	11-AUG-00		6010
			V	<1	% RPD	MDK	11-AUG-00		6010
			ZN	1.1	% RPD	MDK	11-AUG-00		6010
			AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
CD	1.0	ppm				6010			
WG000545-16		Reporting Limit	CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.050	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project )

Batch No: W0000545

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
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\* Spikes outside acceptance limits due to matrix interference.  
\*\* LCS for Sb is within ERA (244) 95% confidence interval.

AKH for VPK  
Approved  
LCS  
Reviewer









ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

CHAIN-OF-CUSTODY RECORD

Page 1 of 3

Project Number/Name \_\_\_\_\_  
 Project Location 1000 ...  
 Laboratory ...  
 Project Manager ...  
 Sampler(s)/Affiliation ...

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	ANALYSIS / METHOD / SIZE		Remarks	Total
1001	S	10/28/00					1
1002	S	10/28/00					1
1003	S	10/28/00					1
1004	S	10/28/00					1
1005	S	10/28/00					1
1006	S	10/28/00					1
1007	S	10/28/00					1
1008	S	10/28/00					1
1009	S	10/28/00					1
1010	S	10/28/00					1
1011	S	10/28/00					1
1012	S	10/28/00					1
1013	S	10/28/00					1
1014	S	10/28/00					1
1015	S	10/28/00					1
1016	S	10/28/00					1
1017	S	10/28/00					1
1018	S	10/28/00					1
1019	S	10/28/00					1
1020	S	10/28/00					1
1021	S	10/28/00					1
1022	S	10/28/00					1
1023	S	10/28/00					1
1024	S	10/28/00					1
1025	S	10/28/00					1
1026	S	10/28/00					1
1027	S	10/28/00					1
1028	S	10/28/00					1
1029	S	10/28/00					1
1030	S	10/28/00					1
1031	S	10/28/00					1
1032	S	10/28/00					1
1033	S	10/28/00					1
1034	S	10/28/00					1
1035	S	10/28/00					1
1036	S	10/28/00					1
1037	S	10/28/00					1
1038	S	10/28/00					1
1039	S	10/28/00					1
1040	S	10/28/00					1
1041	S	10/28/00					1
1042	S	10/28/00					1
1043	S	10/28/00					1
1044	S	10/28/00					1
1045	S	10/28/00					1
1046	S	10/28/00					1
1047	S	10/28/00					1
1048	S	10/28/00					1
1049	S	10/28/00					1
1050	S	10/28/00					1
1051	S	10/28/00					1
1052	S	10/28/00					1
1053	S	10/28/00					1
1054	S	10/28/00					1
1055	S	10/28/00					1
1056	S	10/28/00					1
1057	S	10/28/00					1
1058	S	10/28/00					1
1059	S	10/28/00					1
1060	S	10/28/00					1
1061	S	10/28/00					1
1062	S	10/28/00					1
1063	S	10/28/00					1
1064	S	10/28/00					1
1065	S	10/28/00					1
1066	S	10/28/00					1
1067	S	10/28/00					1
1068	S	10/28/00					1
1069	S	10/28/00					1
1070	S	10/28/00					1
1071	S	10/28/00					1
1072	S	10/28/00					1
1073	S	10/28/00					1
1074	S	10/28/00					1
1075	S	10/28/00					1
1076	S	10/28/00					1
1077	S	10/28/00					1
1078	S	10/28/00					1
1079	S	10/28/00					1
1080	S	10/28/00					1
1081	S	10/28/00					1
1082	S	10/28/00					1
1083	S	10/28/00					1
1084	S	10/28/00					1
1085	S	10/28/00					1
1086	S	10/28/00					1
1087	S	10/28/00					1
1088	S	10/28/00					1
1089	S	10/28/00					1
1090	S	10/28/00					1
1091	S	10/28/00					1
1092	S	10/28/00					1
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1094	S	10/28/00					1
1095	S	10/28/00					1
1096	S	10/28/00					1
1097	S	10/28/00					1
1098	S	10/28/00					1
1099	S	10/28/00					1
1100	S	10/28/00					1

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: W. H. ... Organization: ARCADIS Date: 10/28/00 Time: 10:00 Seal Intact? Yes No N/A

Received by: W. H. ... Organization: ARCADIS Date: 10/28/00 Time: 10:00 Seal Intact? Yes No N/A

Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_ Seal Intact? Yes No N/A

Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_ Seal Intact? Yes No N/A

Special Instructions/Remarks: ...

Delivery Method:  In Person  Common Carrier  Lab Courier  Other \_\_\_\_\_

SPECIFY \_\_\_\_\_



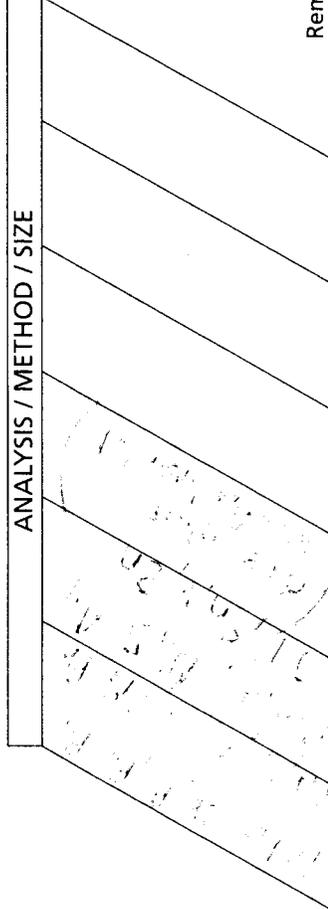
ARCADIS GERAGHTY & MILLER

Laboratory Task Order No./P.O. No. \_\_\_\_\_

# CHAIN-OF-CUSTODY RECORD

Page \_\_\_\_\_ of \_\_\_\_\_

Project Number/Name \_\_\_\_\_  
 Project Location \_\_\_\_\_  
 Laboratory \_\_\_\_\_  
 Project Manager \_\_\_\_\_  
 Sampler(s)/Affiliation \_\_\_\_\_



Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
BTS 0000	S	11/17			1
BTS 0001	L	11/16			1
BTS 0002	S	11/15			1
BTS 0003	S	11/15			1
BTS 0004	S	11/15			1
BTS 0005	S	11/15			1
BTS 0006	S	11/15			1
BTS 0007	S	11/15			1
BTS 0008	S	11/15			1
BTS 0009	S	11/15			1
BTS 0010	S	11/15			1
BTS 0011	S	11/15			1
BTS 0012	S	11/15			1
BTS 0013	S	11/15			1
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BTS 0027	S	11/15			1
BTS 0028	S	11/15			1
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BTS 0030	S	11/15			1
BTS 0031	S	11/15			1
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BTS 0098	S	11/15			1
BTS 0099	S	11/15			1
BTS 0100	S	11/15			1

Sample Matrix: L = Liquid; S = Solid; A = Air  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: 11/17/11 Time: 11:00  
 Received by: Flatten Organization: ARCADIS Date: 6/28/00 Time: 11:00  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: / / Time: \_\_\_\_\_

Special Instructions/Remarks:  
BTS. RUN (O.S.) - HOLD AN OTHER DEPTHS UNTIL NOTIFIED BY AIRCRAFT

Delivery Method:  In Person  Common Carrier  Lab Courier  Other

Project Number/Name CCCC00010001  
 Project Location Sparks Community TX  
 Laboratory AARC, Fort Worth, TX  
 Project Manager KE BOWEN  
 Sampler(s)/Affiliation KE BOWEN

ANALYSIS / METHOD / SIZE  
 (8) 200 g/LK  
 (1) 100 g/LK  
 (1) 50 g/LK  
 (1) 25 g/LK  
 (1) 12.5 g/LK  
 (1) 6.25 g/LK  
 (1) 3.125 g/LK  
 (1) 1.5625 g/LK  
 (1) 0.78125 g/LK  
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 (1) 0.1953125 g/LK  
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Project Number/Name CCOOL/ALC/001  
 Project Location Essex, Corpus Christi, TX  
 Laboratory Asfield, Salt Lake City, UT  
 Project Manager Ken Brantner  
 Sampler(s)/Affiliation BH / ARCADIS

ANALYSIS / METHOD / SIZE

TRIAL - Sp. Res. B. (2.1g Cu, 1.5g Pb, 1.5g Ni, 5g Ag) (8 oz glass bottle) for heavy metal

Sample ID/Location	Matrix	Date/Time Sampled	Lab ID	Remarks	Total
Bub (0-0.5)	S	6/27/02 1040			1
Bub (2-2.5)		1045		HOLD	1
Bub (5-5)		1050		HOLD	1
Bub (8-5)		1055		HOLD	1
Bub (11-5)		1030		HOLD	1
Bub (14-5)		1035		HOLD	1
Bub (15.7-16)	S	1040		HOLD	1
Duplicate 31 (8.5)	S				1
Duplicate 32 (8.5)	S				1
Duplicate 33 (8.5)	S				1
Equipment 31	L	920			2
Equipment 32	L	1300			2
Equipment 33	L	1500			2
FIELD BUNK	L	1305			2
Total No. of Bottles/Containers					18

Sample Matrix: L = Liquid; S = Solid; A = Air

Relinquished by: Dunlap/Kelly Organization: ARCADIS Date: 6/27/02 Time: 10:00 Seal Intact? Yes  
 Received by: Wotter Organization: Arceco Date: 6/28/00 Time: 11:00 Seal Intact? Yes  
 Relinquished by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_  
 Received by: \_\_\_\_\_ Organization: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Seal Intact? \_\_\_\_\_

Special Instructions/Remarks: Bub - SUN 0-0.5 - HOLD ALL OTHER DEPTHS UPILL NOTIFIED BY RECORDS





September 21, 2000

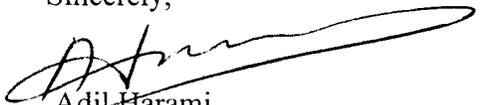
Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (28), twenty eight soil samples collected on June 20, 2000, in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 22, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,

  
Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001136

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001136-001	20-JUN-00	B65 (0-0.5)	CD	10.	ppm	MDK	21-AUG-00	6010
			CR	21.	ppm	MDK	21-AUG-00	6010
			MN	419.	ppm	MDK	21-AUG-00	6010
			TL	2.	ppm	MDK	21-AUG-00	6010
L001136-002	20-JUN-00	B65 (2-2.5)	ZN	1110.	ppm	MDK	21-AUG-00	6010
			AG	1.	ppm	MDK	21-AUG-00	6010
			CD	2.	ppm	MDK	21-AUG-00	6010
			CO	6.	ppm	MDK	21-AUG-00	6010
L001136-003	20-JUN-00	B65 (5.5)	CR	28.	ppm	MDK	21-AUG-00	6010
			CU	30.	ppm	MDK	21-AUG-00	6010
			MN	386.	ppm	MDK	21-AUG-00	6010
			NI	9.	ppm	MDK	21-AUG-00	6010
			PB	1570.	ppm	MDK	21-AUG-00	6010
			SB	3.*	ppm	MDK	21-AUG-00	6010
			SN	518.	ppm	MDK	21-AUG-00	6010
			ZN	684.	ppm	MDK	21-AUG-00	6010
			AG	<0.5	ppm	MDK	21-AUG-00	6010
			MN	349.	ppm	MDK	21-AUG-00	6010
			SB	1.*	ppm	MDK	21-AUG-00	6010
L001136-004	20-JUN-00	B65 (8.5)	ZN	1750.	ppm	MDK	21-AUG-00	6010
			CR	16.	ppm	MDK	21-AUG-00	6010
			SB	1.*	ppm	MDK	21-AUG-00	6010
			SN	11.	ppm	MDK	21-AUG-00	6010
L001136-005	20-JUN-00	B65 (11.5)	TL	2.	ppm	MDK	21-AUG-00	6010
			V	38.	ppm	MDK	21-AUG-00	6010
			ZN	57.	ppm	MDK	21-AUG-00	6010
			SE	<0.8	ppm	MDK	21-AUG-00	6010
L001136-006	20-JUN-00	B65 (14.5)	ZN	39.	ppm	MDK	21-AUG-00	6010
			CO	7.	ppm	MDK	21-AUG-00	6010
			CR	23.	ppm	MDK	21-AUG-00	6010
			SE	1.	ppm	MDK	21-AUG-00	6010
L001136-007	20-JUN-00	B65 (14.5)	ZN	17.	ppm	MDK	21-AUG-00	6010
			ZN	17.	ppm	MDK	21-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001136

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001136-007	20-JUN-00	B65 (15.3-16)	AG	<0.5	ppm	MDK	21-AUG-00	6010
			CO	9.	ppm	MDK	21-AUG-00	6010
			CR	39.	ppm	MDK	21-AUG-00	6010
			NI	18.	ppm	MDK	21-AUG-00	6010
			SE	1.	ppm	MDK	21-AUG-00	6010
			ZN	18.	ppm	MDK	21-AUG-00	6010
L001136-008	20-JUN-00	B66 (0-0.5)	CR	93.	ppm	MDK	21-AUG-00	6010
			MN	532.	ppm	MDK	21-AUG-00	6010
			TL	<1.	ppm	MDK	21-AUG-00	6010
			ZN	4176.	ppm	MDK	21-AUG-00	6010
L001136-009	20-JUN-00	B66 (2-2.5)	AG	<0.5	ppm	MDK	21-AUG-00	6010
			CR	12.	ppm	MDK	21-AUG-00	6010
			CU	29.	ppm	MDK	21-AUG-00	6010
			MN	257.	ppm	MDK	21-AUG-00	6010
			PB	29.	ppm	MDK	21-AUG-00	6010
			SB	1.*	ppm	MDK	21-AUG-00	6010
			SN	6.	ppm	MDK	21-AUG-00	6010
			ZN	99.	ppm	MDK	21-AUG-00	6010
L001136-010	20-JUN-00	B66 (5.5)	SB	1.*	ppm	MDK	21-AUG-00	6010
			ZN	110.	ppm	MDK	21-AUG-00	6010
L001136-011	20-JUN-00	B66 (8.5)	CR	11.	ppm	MDK	21-AUG-00	6010
			SB	1.*	ppm	MDK	21-AUG-00	6010
			SN	5.	ppm	MDK	21-AUG-00	6010
			TL	6.	ppm	MDK	21-AUG-00	6010
			V	25.	ppm	MDK	21-AUG-00	6010
			ZN	72.	ppm	MDK	21-AUG-00	6010
L001136-012	20-JUN-00	B66 (11.5)	ZN	37.	ppm	MDK	21-AUG-00	6010
L001136-013	20-JUN-00	B66 (14.5)	SE	<0.8	ppm	MDK	21-AUG-00	6010
			ZN	13.	ppm	MDK	21-AUG-00	6010
L001136-014	20-JUN-00	B66 (15.7-16)	CR	49.	ppm	MDK	21-AUG-00	6010
			SE	1.	ppm	MDK	21-AUG-00	6010
			ZN	11.	ppm	MDK	21-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001136

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001136-015	20-JUN-00	B62 (0-0.5)	AG	<0.5	ppm	MDK	21-AUG-00	6010
			AS	<5.	ppm	MDK	21-AUG-00	6010
			CD	4.	ppm	MDK	21-AUG-00	6010
			CO	6.	ppm	MDK	21-AUG-00	6010
			CR	34.	ppm	MDK	21-AUG-00	6010
			CU	8.	ppm	MDK	21-AUG-00	6010
			HG	<0.05	ppm	VPK	18-JUL-00	7471
			NI	18.	ppm	MDK	21-AUG-00	6010
			PB	11.	ppm	MDK	21-AUG-00	6010
			SB	1.*	ppm	MDK	21-AUG-00	6010
			SE	<0.8	ppm	MDK	21-AUG-00	6010
			ZN	385.	ppm	MDK	21-AUG-00	6010
			L001136-016	20-JUN-00	B62 (2-2.5)	CR	15.	ppm
TL	2.	ppm				MDK	21-AUG-00	6010
ZN	36.	ppm				MDK	21-AUG-00	6010
L001136-017	20-JUN-00	B62 (5.5)	CR	11.	ppm	MDK	21-AUG-00	6010
			TL	2.	ppm	MDK	21-AUG-00	6010
			V	34.	ppm	MDK	21-AUG-00	6010
			ZN	38.	ppm	MDK	21-AUG-00	6010
L001136-018	20-JUN-00	B62 (8.5)	SB	<0.8*	ppm	MDK	21-AUG-00	6010
			SE	<0.8	ppm	MDK	21-AUG-00	6010
			TL	<1.	ppm	MDK	21-AUG-00	6010
			ZN	26.	ppm	MDK	21-AUG-00	6010
L001136-019	20-JUN-00	B62 (11.5)	CR	27.	ppm	MDK	21-AUG-00	6010
			TL	<1.	ppm	MDK	21-AUG-00	6010
			ZN	20.	ppm	MDK	21-AUG-00	6010
L001136-020	20-JUN-00	B62 (14.5)	CO	6	ppm	MDK	21-AUG-00	6010
			CR	26.	ppm	MDK	21-AUG-00	6010
			NI	12	ppm	MDK	21-AUG-00	6010
			SE	<0.8	ppm	MDK	21-AUG-00	6010
			TL	<1.	ppm	MDK	21-AUG-00	6010
ZN	8.	ppm	MDK	21-AUG-00	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001136

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001136-021	20-JUN-00	B62 (15-16)	CO	10.	ppm	MDK	21-AUG-00	6010
			CR	54.	ppm	MDK	21-AUG-00	6010
			NI	26.	ppm	MDK	21-AUG-00	6010
			SE	1.	ppm	MDK	21-AUG-00	6010
L001136-022	20-JUN-00	B63 (0-0.5)	ZN	8.	ppm	MDK	21-AUG-00	6010
			CR	18.	ppm	MDK	21-AUG-00	6010
			SB	<0.8*	ppm	MDK	21-AUG-00	6010
			ZN	59.	ppm	MDK	21-AUG-00	6010
L001136-023	20-JUN-00	B63 (2-2.5)	CR	14.	ppm	MDK	21-AUG-00	6010
			TL	2.	ppm	MDK	21-AUG-00	6010
			ZN	66.	ppm	MDK	21-AUG-00	6010
L001136-024	20-JUN-00	B63 (5.5)	TL	2.	ppm	MDK	21-AUG-00	6010
			ZN	64.	ppm	MDK	21-AUG-00	6010
L001136-025	20-JUN-00	B63 (8.5)	ZN	34.	ppm	MDK	21-AUG-00	6010
L001136-026	20-JUN-00	B63 (11.5)	ZN	14.	ppm	MDK	21-AUG-00	6010
L001136-027	20-JUN-00	B63 (14.5)	ZN	9.	ppm	MDK	21-AUG-00	6010
L001136-028	20-JUN-00	B63 (15-16)	CO	10.	ppm	MDK	21-AUG-00	6010
			CR	45.	ppm	MDK	21-AUG-00	6010
			NI	21.	ppm	MDK	21-AUG-00	6010
			SE	<0.8	ppm	MDK	21-AUG-00	6010
			ZN	6.	ppm	MDK	21-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001136

LAB NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
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(\*) Quality control data indicates a possible bias. See QC report for details.

Unless otherwise noted results are not blank corrected.

  
Approved

  
Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000746

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD	
WG000746-1		Matrix Spike	AG	107						
			AS	92		\$Recovery	MDK	21-AUG-00		6010
			BA	91		\$Recovery	MDK	21-AUG-00		6010
			BI	97		\$Recovery	MDK	21-AUG-00		6010
			CD	92		\$Recovery	MDK	21-AUG-00		6010
			CO	91		\$Recovery	MDK	21-AUG-00		6010
			CR	99		\$Recovery	MDK	21-AUG-00		6010
			CU	109		\$Recovery	MDK	21-AUG-00		6010
			HG	98		\$Recovery	VPK	18-JUL-00		7471
			MN	99		\$Recovery	MDK	21-AUG-00		6010
			NI	93		\$Recovery	MDK	21-AUG-00		6010
			PB	93		\$Recovery	MDK	21-AUG-00		6010
			SB	48*		\$Recovery	MDK	21-AUG-00		6010
			SE	78		\$Recovery	MDK	21-AUG-00		6010
			SN	94		\$Recovery	MDK	21-AUG-00		6010
			TL	84		\$Recovery	MDK	21-AUG-00		6010
			V	100		\$Recovery	MDK	21-AUG-00		6010
	ZN	94		\$Recovery	MDK	21-AUG-00		6010		
WG000746-2		Prep Blank	AG	<0.5	ppm	MDK	21-AUG-00		6010	
			AS	<5.0	ppm	MDK	21-AUG-00		6010	
			BA	<5.0	ppm	MDK	21-AUG-00		6010	
			BI	<4.0	ppm	MDK	21-AUG-00		6010	
			CD	<1.0	ppm	MDK	21-AUG-00		6010	
			CO	<5.0	ppm	MDK	21-AUG-00		6010	
			CR	<5.0	ppm	MDK	21-AUG-00		6010	
			CU	<5.0	ppm	MDK	21-AUG-00		6010	
			HG	<0.05	ppm	VPK	18-JUL-00		7471	
			MN	<5.0	ppm	MDK	21-AUG-00		6010	
			NI	<5.0	ppm	MDK	21-AUG-00		6010	
			PB	<5.0	ppm	MDK	21-AUG-00		6010	
			SB	<0.8	ppm	MDK	21-AUG-00		6010	
			SE	<0.8	ppm	MDK	21-AUG-00		6010	
			SN	<5.0	ppm	MDK	21-AUG-00		6010	
			TL	2.1	ppm	MDK	21-AUG-00		6010	
			V	<5.0	ppm	MDK	21-AUG-00		6010	
	ZN	<5.0	ppm	MDK	21-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000746

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000746-3		Lab Control Sample	AG	105	% Recovery	MDK	21-AUG-00	6010	6010			
			AS	103	% Recovery	MDK	21-AUG-00	6010	6010			
			BA	108	% Recovery	MDK	21-AUG-00	6010	6010			
			BI	92	% Recovery	MDK	21-AUG-00	6010	6010			
			CD	105	% Recovery	MDK	21-AUG-00	6010	6010			
			CO	102	% Recovery	MDK	21-AUG-00	6010	6010			
			CR	109	% Recovery	MDK	21-AUG-00	6010	6010			
			CU	114	% Recovery	MDK	21-AUG-00	6010	6010			
			HG	97	% Recovery	VPK	18-JUL-00	7471	6010			
			MN	105	% Recovery	MDK	21-AUG-00	6010	6010			
			NI	104	% Recovery	MDK	21-AUG-00	6010	6010			
			PB	103	% Recovery	MDK	21-AUG-00	6010	6010			
			SB	152**	% Recovery	MDK	21-AUG-00	6010	6010			
			SE	87	% Recovery	MDK	21-AUG-00	6010	6010			
			SN	112	% Recovery	MDK	21-AUG-00	6010	6010			
			TL	118	% Recovery	MDK	21-AUG-00	6010	6010			
			V	111	% Recovery	MDK	21-AUG-00	6010	6010			
			ZN	98	% Recovery	MDK	21-AUG-00	6010	6010			
			WG000746-5		Matrix Spike Duplicate	AG	2.6	% RPD	MDK	21-AUG-00	6010	6010
						AS	2	% RPD	MDK	21-AUG-00	6010	6010
BA	1.5	% RPD				MDK	21-AUG-00	6010	6010			
BI	2.2	% RPD				MDK	21-AUG-00	6010	6010			
CD	2.8	% RPD				MDK	21-AUG-00	6010	6010			
CO	<1	% RPD				MDK	21-AUG-00	6010	6010			
CR	<1	% RPD				MDK	21-AUG-00	6010	6010			
CU	<1	% RPD				MDK	21-AUG-00	6010	6010			
HG	2.1	% RPD				VPK	18-JUL-00	7471	6010			
MN	<1	% RPD				MDK	21-AUG-00	6010	6010			
NI	1.7	% RPD				MDK	21-AUG-00	6010	6010			
PB	1.4	% RPD				MDK	21-AUG-00	6010	6010			
SB	5.2	% RPD				MDK	21-AUG-00	6010	6010			
SE	2.5	% RPD				MDK	21-AUG-00	6010	6010			
SN	1.3	% RPD				MDK	21-AUG-00	6010	6010			
TL	<1	% RPD				MDK	21-AUG-00	6010	6010			
V	<1	% RPD				MDK	21-AUG-00	6010	6010			
ZN	<1	% RPD				MDK	21-AUG-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycycle/Texas

Technical Services (Project 8201)

Batch No: WG000746

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000746-6		Reporting Limit	AG	0.50	ppm				6010			
			AS	5.0	ppm				6010			
			BA	5.0	ppm					6010		
			BI	4.0	ppm					6010		
			CD	1.0	ppm					6010		
			CO	5.0	ppm					6010		
			CR	5.0	ppm					6010		
			CU	5.0	ppm					6010		
			HG	0.05	ppm					7471		
			MN	5.0	ppm					6010		
			NI	5.0	ppm					6010		
			PB	5.0	ppm					6010		
			SB	0.80	ppm					6010		
			SE	0.80	ppm					6010		
			SN	5.0	ppm					6010		
			TL	1.0	ppm					6010		
			V	5.0	ppm					6010		
			ZN	5.0	ppm					6010		
			WG000746-7		Matrix Spike	AG	105	%Recovery	MDK	21-AUG-00		6010
						AS	93	%Recovery	MDK	21-AUG-00		6010
BA	91	%Recovery				MDK	21-AUG-00		6010			
BI	97	%Recovery				MDK	21-AUG-00		6010			
CD	91	%Recovery				MDK	21-AUG-00		6010			
CO	92	%Recovery				MDK	21-AUG-00		6010			
CR	104	%Recovery				MDK	21-AUG-00		6010			
CU	113	%Recovery				MDK	21-AUG-00		6010			
MN	109	%Recovery				MDK	21-AUG-00		6010			
NI	95	%Recovery				MDK	21-AUG-00		6010			
PB	94	%Recovery				MDK	21-AUG-00		6010			
SB	51*	%Recovery				MDK	21-AUG-00		6010			
SE	79	%Recovery				MDK	21-AUG-00		6010			
SN	96	%Recovery				MDK	21-AUG-00		6010			
TL	84	%Recovery				MDK	21-AUG-00		6010			
V	100	%Recovery				MDK	21-AUG-00		6010			
ZN	96	%Recovery				MDK	21-AUG-00		6010			
WG000746-8		Prep Blank				AG	<0.5	ppm	MDK	21-AUG-00		6010
						AS	<5.0	ppm	MDK	21-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000746

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000746-8		Prep Blank	BA	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			BI	<4.0	ppm	MDK	21-AUG-00	6010	6010			
			CD	<1.0	ppm	MDK	21-AUG-00	6010	6010			
			CO	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			CR	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			CU	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			MN	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			NI	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			PB	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			SB	<0.8	ppm	MDK	21-AUG-00	6010	6010			
			SE	<0.8	ppm	MDK	21-AUG-00	6010	6010			
			SN	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			TL	<1.0	ppm	MDK	21-AUG-00	6010	6010			
			V	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			ZN	<5.0	ppm	MDK	21-AUG-00	6010	6010			
			WG000746-9		Lab Control Sample	AG	104	%Recovery	MDK	21-AUG-00	6010	6010
						AS	105	%Recovery	MDK	21-AUG-00	6010	6010
						BA	109	%Recovery	MDK	21-AUG-00	6010	6010
						BI	97	%Recovery	MDK	21-AUG-00	6010	6010
						CD	107	%Recovery	MDK	21-AUG-00	6010	6010
CO	102	%Recovery				MDK	21-AUG-00	6010	6010			
CR	110	%Recovery				MDK	21-AUG-00	6010	6010			
CU	118	%Recovery				MDK	21-AUG-00	6010	6010			
MN	105	%Recovery				MDK	21-AUG-00	6010	6010			
NI	107	%Recovery				MDK	21-AUG-00	6010	6010			
PB	104	%Recovery				MDK	21-AUG-00	6010	6010			
SB	159**	%Recovery				MDK	21-AUG-00	6010	6010			
SE	88	%Recovery				MDK	21-AUG-00	6010	6010			
SN	115	%Recovery				MDK	21-AUG-00	6010	6010			
TL	110	%Recovery				MDK	21-AUG-00	6010	6010			
V	109	%Recovery				MDK	21-AUG-00	6010	6010			
ZN	98	%Recovery				MDK	21-AUG-00	6010	6010			
WG000746-11		Matrix Spike Duplicate				AG	2.6	% RPD	MDK	21-AUG-00	6010	6010
						AS	<1	% RPD	MDK	21-AUG-00	6010	6010
						BA	1.5	% RPD	MDK	21-AUG-00	6010	6010
			BI	1.3	% RPD	MDK	21-AUG-00	6010	6010			
			CD	1.1	% RPD	MDK	21-AUG-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000746

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		METHOD
							ANALYZED	HOUD	
WG000746-11		Matrix Spike Duplicate	CO	1	% RPD	MDK	21-AUG-00	6010	6010
			CR	<1	% RPD	MDK	21-AUG-00	6010	6010
			CU	<1	% RPD	MDK	21-AUG-00	6010	6010
			MN	1.5	% RPD	MDK	21-AUG-00	6010	6010
			NI	<1	% RPD	MDK	21-AUG-00	6010	6010
			PB	1.9	% RPD	MDK	21-AUG-00	6010	6010
			SB	4.9	% RPD	MDK	21-AUG-00	6010	6010
			SE	<1	% RPD	MDK	21-AUG-00	6010	6010
			SN	<1	% RPD	MDK	21-AUG-00	6010	6010
			TL	2.5	% RPD	MDK	21-AUG-00	6010	6010
			V	7.1	% RPD	MDK	21-AUG-00	6010	6010
			ZN	<1	% RPD	MDK	21-AUG-00	6010	6010

\* Spikes outside acceptance limits due to matrix interference.  
 \*\* LCS for Sb is within ERA (244), 95% confidence interval.

  
 Approved  
  
 Reviewer



September 22, 2000

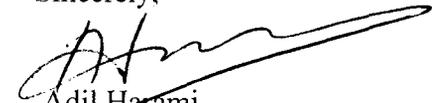
Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (79), seventy nine soil samples collected between June 23 and June 27, 2000, in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 27 and June 28, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,



Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-001	23-JUN-00	B-48 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			CD	<1.	ppm	MDK	01-SEP-00	6010
			CR	14.*	ppm	MDK	01-SEP-00	6010
			MN	295.	ppm	MDK	01-SEP-00	6010
			SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	88.	ppm	MDK	01-SEP-00	6010
L000999-002	23-JUN-00	B-48 (5.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	50.	ppm	MDK	01-SEP-00	6010
L000999-003	23-JUN-00	B-48 (8.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	38.	ppm	MDK	01-SEP-00	6010
L000999-004	23-JUN-00	B-48 (11.5-12)	SB	1.*	ppm	MDK	01-SEP-00	6010
			ZN	25.	ppm	MDK	01-SEP-00	6010
L000999-005	23-JUN-00	B-106 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			AS	<5.	ppm	MDK	01-SEP-00	6010
			BA	101.*	ppm	MDK	01-SEP-00	6010
			BI	<4.	ppm	MDK	01-SEP-00	6010
			CD	22.	ppm	MDK	01-SEP-00	6010
			CO	6.	ppm	MDK	01-SEP-00	6010
			CR	16.*	ppm	MDK	01-SEP-00	6010
			CU	18.*	ppm	MDK	01-SEP-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	392.	ppm	MDK	01-SEP-00	6010
			MOIST.	19.	%	KJF	15-JUL-00	GRAV.
			NI	12.	ppm	MDK	01-SEP-00	6010
			PB	16.	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010
			SE	<0.8*	ppm	MDK	01-SEP-00	6010
			SN	<5.*	ppm	MDK	01-SEP-00	6010
			TL	<1.	ppm	MDK	01-SEP-00	6010
			V	18.*	ppm	MDK	01-SEP-00	6010
			ZN	864.	ppm	MDK	01-SEP-00	6010
L000999-006	23-JUN-00	B-106 (5.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			AS	<5.	ppm	MDK	01-SEP-00	6010
			BA	235.*	ppm	MDK	01-SEP-00	6010

ASARCO TECHNICAL SERVICES CENTER

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Encycle/Texas

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Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD			
L000999-006	23-JUN-00	B-106 (5.5)	BI	<4.	ppm	MDK	01-SEP-00	6010			
			CD	4.	ppm	MDK	01-SEP-00	6010			
			CO	<5.	ppm	MDK	01-SEP-00	6010			
			CR	12.*	ppm	MDK	01-SEP-00	6010			
			CU	9.*	ppm	MDK	01-SEP-00	6010			
			HG	<0.05	ppm	EH	17-JUL-00	7471			
			MN	308.	ppm	MDK	01-SEP-00	6010			
			MOIST.	18.	%	MJF	15-JUL-00	GRAV.			
			NI	8.	ppm	MDK	01-SEP-00	6010			
			PB	9.	ppm	MDK	01-SEP-00	6010			
			SB	2.*	ppm	MDK	01-SEP-00	6010			
			SE	<0.8*	ppm	MDK	01-SEP-00	6010			
			SN	<5.*	ppm	MDK	01-SEP-00	6010			
			TL	<1.	ppm	MDK	01-SEP-00	6010			
			V	25.*	ppm	MDK	01-SEP-00	6010			
			ZN	159.	ppm	MDK	01-SEP-00	6010			
			L000999-007	23-JUN-00	B-106 (8.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
						AS	5.	ppm	MDK	01-SEP-00	6010
						BA	373.*	ppm	MDK	01-SEP-00	6010
						BI	<4.	ppm	MDK	01-SEP-00	6010
CD	2.	ppm				MDK	01-SEP-00	6010			
CO	<5.	ppm				MDK	01-SEP-00	6010			
CR	11.*	ppm				MDK	01-SEP-00	6010			
CU	7.*	ppm				MDK	01-SEP-00	6010			
MN	287.	ppm				MDK	01-SEP-00	6010			
NI	7.	ppm				MDK	01-SEP-00	6010			
PB	8.	ppm				MDK	01-SEP-00	6010			
SB	2.*	ppm				MDK	01-SEP-00	6010			
SE	<0.8*	ppm				MDK	01-SEP-00	6010			
SN	<5.*	ppm				MDK	01-SEP-00	6010			
TL	<1.	ppm				MDK	01-SEP-00	6010			
V	32.*	ppm				MDK	01-SEP-00	6010			
ZN	139.	ppm				MDK	01-SEP-00	6010			
L000999-008	23-JUN-00	B-106 (10-11)				AG	<0.5	ppm	MDK	01-SEP-00	6010
						AS	<5.	ppm	MDK	01-SEP-00	6010
						BA	220.*	ppm	MDK	01-SEP-00	6010
BI	<4.	ppm	MDK	01-SEP-00	6010						

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD			
L000999-008	23-JUN-00	B-106 (10-11)	CD	2.	ppm	MDK	01-SEP-00	6010			
			CO	<5.	ppm	MDK	01-SEP-00	6010			
			CR	8.*	ppm	MDK	01-SEP-00	6010			
			CU	5.*	ppm	MDK	01-SEP-00	6010			
			MN	222.	ppm	MDK	01-SEP-00	6010			
			NI	6.	ppm	MDK	01-SEP-00	6010			
			PB	8.	ppm	MDK	01-SEP-00	6010			
			SB	2.*	ppm	MDK	01-SEP-00	6010			
			SE	<0.8*	ppm	MDK	01-SEP-00	6010			
			SN	<5.*	ppm	MDK	01-SEP-00	6010			
			TL	<1.	ppm	MDK	01-SEP-00	6010			
			V	20.*	ppm	MDK	01-SEP-00	6010			
			ZN	134.	ppm	MDK	01-SEP-00	6010			
			L000999-009	23-JUN-00	B-105 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
						AS	<5.	ppm	MDK	01-SEP-00	6010
						BA	87.*	ppm	MDK	01-SEP-00	6010
						BI	<4.	ppm	MDK	01-SEP-00	6010
						CD	48.	ppm	MDK	01-SEP-00	6010
						CN-	0.16	ppm	DC	07-JUL-00	335.2
						CO	6.	ppm	MDK	01-SEP-00	6010
CR	13.*	ppm				MDK	01-SEP-00	6010			
CU	29.*	ppm				MDK	01-SEP-00	6010			
HG	<0.05	ppm				EH	17-JUL-00	7471			
MN	1490.	ppm				MDK	01-SEP-00	6010			
MOIST.	19.	%				MJF	15-JUL-00	GRAV.			
NI	12.	ppm				MDK	01-SEP-00	6010			
PB	27.	ppm				MDK	01-SEP-00	6010			
SB	3.*	ppm				MDK	01-SEP-00	6010			
SE	<0.8*	ppm				MDK	01-SEP-00	6010			
SN	<5.*	ppm				MDK	01-SEP-00	6010			
TL	<1.	ppm				MDK	01-SEP-00	6010			
V	14.*	ppm				MDK	01-SEP-00	6010			
ZN	6434.	ppm				MDK	01-SEP-00	6010			
L000999-010	23-JUN-00	B-105 (5.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010			
			AS	<5.	ppm	MDK	01-SEP-00	6010			
			BA	508.*	ppm	MDK	01-SEP-00	6010			
			BI	<4.	ppm	MDK	01-SEP-00	6010			

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-010	23-JUN-00	B-105 (5.5)	CD	<1.	ppm	MDK	01-SEP-00	6010
			CN-	<0.04	ppm	DC	07-JUL-00	335.2
			CO	<5.	ppm	MDK	01-SEP-00	6010
			CR	10.*	ppm	MDK	01-SEP-00	6010
			CU	10.*	ppm	MDK	01-SEP-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	274.	ppm	MDK	01-SEP-00	6010
			MOIST.	17.	%	MJF	15-JUL-00	GRAV.
			NI	8.	ppm	MDK	01-SEP-00	6010
			PB	11.	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010
			SE	<0.8*	ppm	MDK	01-SEP-00	6010
			SN	<5.*	ppm	MDK	01-SEP-00	6010
			TL	<1.	ppm	MDK	01-SEP-00	6010
			V	29.*	ppm	MDK	01-SEP-00	6010
			ZN	124.	ppm	MDK	01-SEP-00	6010
L000999-011	23-JUN-00	B-105 (8.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			AS	5.	ppm	MDK	01-SEP-00	6010
			BA	355.*	ppm	MDK	01-SEP-00	6010
			BI	<4.	ppm	MDK	01-SEP-00	6010
			CD	<1.	ppm	MDK	01-SEP-00	6010
			CO	<5.	ppm	MDK	01-SEP-00	6010
			CR	11.*	ppm	MDK	01-SEP-00	6010
			CU	10.*	ppm	MDK	01-SEP-00	6010
			MN	265.	ppm	MDK	01-SEP-00	6010
			NI	7.	ppm	MDK	01-SEP-00	6010
			PB	10.	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010
			SE	<0.8*	ppm	MDK	01-SEP-00	6010
			SN	<5.*	ppm	MDK	01-SEP-00	6010
			TL	6.	ppm	MDK	01-SEP-00	6010
			V	34.*	ppm	MDK	01-SEP-00	6010
			ZN	89.	ppm	MDK	01-SEP-00	6010
L000999-012	23-JUN-00	B-105 (10.5-11)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			AS	<5.	ppm	MDK	01-SEP-00	6010
			BA	246.*	ppm	MDK	01-SEP-00	6010
			BI	<4.	ppm	MDK	01-SEP-00	6010

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Encycle/Texas

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Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD			
L000999-012	23-JUN-00	B-105 (10.5-11)	CD	<1.	ppm	MDK	01-SEP-00	6010			
			CO	<5.	ppm	MDK	01-SEP-00	6010			
			CR	8.*	ppm	MDK	01-SEP-00	6010			
			CU	7.*	ppm	MDK	01-SEP-00	6010			
			MN	314.	ppm	MDK	01-SEP-00	6010			
			NI	7.	ppm	MDK	01-SEP-00	6010			
			PB	9.	ppm	MDK	01-SEP-00	6010			
			SB	2.*	ppm	MDK	01-SEP-00	6010			
			SE	<0.8*	ppm	MDK	01-SEP-00	6010			
			SN	<5.*	ppm	MDK	01-SEP-00	6010			
			TL	2.	ppm	MDK	01-SEP-00	6010			
			V	22.*	ppm	MDK	01-SEP-00	6010			
			ZN	45.	ppm	MDK	01-SEP-00	6010			
			L000999-013	23-JUN-00	B-107 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
						AS	<5.	ppm	MDK	01-SEP-00	6010
						BA	134.*	ppm	MDK	01-SEP-00	6010
						BI	<4.	ppm	MDK	01-SEP-00	6010
						CD	1.	ppm	MDK	01-SEP-00	6010
						CO	5.	ppm	MDK	01-SEP-00	6010
						CR	12.*	ppm	MDK	01-SEP-00	6010
CU	14.*	ppm				MDK	01-SEP-00	6010			
HG	<0.05	ppm				EH	17-JUL-00	7471			
MN	331.	ppm				MDK	01-SEP-00	6010			
MOIST.	16.	%				MJF	15-JUL-00	GRAY.			
NI	10.	ppm				MDK	01-SEP-00	6010			
PB	13.	ppm				MDK	01-SEP-00	6010			
SB	2.*	ppm				MDK	01-SEP-00	6010			
SE	<0.8*	ppm				MDK	01-SEP-00	6010			
SN	<5.*	ppm				MDK	01-SEP-00	6010			
TL	<1.	ppm				MDK	01-SEP-00	6010			
V	18.*	ppm				MDK	01-SEP-00	6010			
ZN	137.	ppm				MDK	01-SEP-00	6010			
L000999-014	23-JUN-00	B-107 (5.5)				AG	<0.5	ppm	MDK	01-SEP-00	6010
			AS	5.	ppm	MDK	01-SEP-00	6010			
			BA	521.*	ppm	MDK	01-SEP-00	6010			
			BI	<4.	ppm	MDK	01-SEP-00	6010			
			CD	<1.	ppm	MDK	01-SEP-00	6010			

ASARCO TECHNICAL SERVICES CENTER

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Encycle/Texas

Technical Services (Project 8201)

Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD			
L000999-014	23-JUN-00	B-107 (5.5)	CO	5.	ppm	MDK	01-SEP-00	6010			
			CR	14.*	ppm	MDK	01-SEP-00	6010			
			CU	8.*	ppm	MDK	01-SEP-00	6010			
			HG	<0.05	ppm	EH	17-JUL-00	7471			
			MN	283.	ppm	MDK	01-SEP-00	6010			
			MOIST.	17.	%	MJF	15-JUL-00	GRAV.			
			NI	9.	ppm	MDK	01-SEP-00	6010			
			PB	8.	ppm	MDK	01-SEP-00	6010			
			SB	2.*	ppm	MDK	01-SEP-00	6010			
			SE	<0.8*	ppm	MDK	01-SEP-00	6010			
			SN	7.*	ppm	MDK	01-SEP-00	6010			
			TL	1.	ppm	MDK	01-SEP-00	6010			
			V	45.*	ppm	MDK	01-SEP-00	6010			
			ZN	45.	ppm	MDK	01-SEP-00	6010			
			L000999-015	23-JUN-00	B-107 (8.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
						AS	<5.	ppm	MDK	01-SEP-00	6010
						BA	275.*	ppm	MDK	01-SEP-00	6010
						BI	<4.	ppm	MDK	01-SEP-00	6010
						CD	<1.	ppm	MDK	01-SEP-00	6010
						CO	<5.	ppm	MDK	01-SEP-00	6010
CR	10.*	ppm				MDK	01-SEP-00	6010			
CU	8.*	ppm				MDK	01-SEP-00	6010			
MN	290.	ppm				MDK	01-SEP-00	6010			
NI	7.	ppm				MDK	01-SEP-00	6010			
PB	8.	ppm				MDK	01-SEP-00	6010			
SB	3.*	ppm				MDK	01-SEP-00	6010			
SE	<0.8*	ppm				MDK	01-SEP-00	6010			
SN	<5.*	ppm				MDK	01-SEP-00	6010			
TL	<1.	ppm				MDK	01-SEP-00	6010			
V	28.*	ppm				MDK	01-SEP-00	6010			
ZN	39.	ppm				MDK	01-SEP-00	6010			
L000999-016	23-JUN-00	B-107 (10-11)				AG	<0.5	ppm	MDK	01-SEP-00	6010
						AS	<5.	ppm	MDK	01-SEP-00	6010
						BA	230.*	ppm	MDK	01-SEP-00	6010
			BI	<4.	ppm	MDK	01-SEP-00	6010			
			CD	<1.	ppm	MDK	01-SEP-00	6010			
			CO	<5.	ppm	MDK	01-SEP-00	6010			

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Technical Services (Project 8201)

Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-016	23-JUN-00	B-107 (10-11)	CR	10.*	ppm	MDK	01-SEP-00	6010
			CU	10.*	ppm	MDK	01-SEP-00	6010
			MN	246.	ppm	MDK	01-SEP-00	6010
			NI	6.	ppm	MDK	01-SEP-00	6010
			PB	7.	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010
			SE	<0.8*	ppm	MDK	01-SEP-00	6010
			SN	<5.*	ppm	MDK	01-SEP-00	6010
			TL	<1.	ppm	MDK	01-SEP-00	6010
			V	22.*	ppm	MDK	01-SEP-00	6010
			ZN	35.	ppm	MDK	01-SEP-00	6010
L000999-017	23-JUN-00	B-95 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			CD	<1.	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010
			TL	<1.	ppm	MDK	01-SEP-00	6010
			ZN	58.	ppm	MDK	01-SEP-00	6010
L000999-018	23-JUN-00	B-95 (5.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	49.	ppm	MDK	01-SEP-00	6010
L000999-019	23-JUN-00	B-95 (8.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	52.	ppm	MDK	01-SEP-00	6010
L000999-020	23-JUN-00	B-95 (11.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	44.	ppm	MDK	01-SEP-00	6010
L000999-021	23-JUN-00	B-95 (14.3-15)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	44.	ppm	MDK	01-SEP-00	6010
L000999-022	26-JUN-00	B-34 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			BA	292.*	ppm	MDK	01-SEP-00	6010
			CD	53.	ppm	MDK	01-SEP-00	6010
			CO	6.	ppm	MDK	01-SEP-00	6010
			CR	14.*	ppm	MDK	01-SEP-00	6010
			CU	66.*	ppm	MDK	01-SEP-00	6010
			MN	392.	ppm	MDK	01-SEP-00	6010
			NI	10.	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-022	26-JUN-00	B-34 (2-2.5)	ZN	1690.	ppm	MDK	01-SEP-00	6010
L000999-023	26-JUN-00	B-34 (5.5)	CD	8.	ppm	MDK	01-SEP-00	6010
			CU	25.*	ppm	MDK	01-SEP-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	481.	ppm	MDK	01-SEP-00	6010
			MOIST.	20.	%	MJF	15-JUL-00	GRAV.
			SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	404.	ppm	MDK	01-SEP-00	6010
L000999-024	26-JUN-00	B-34 (8.5)	CD	3.	ppm	MDK	01-SEP-00	6010
			CU	8.*	ppm	MDK	01-SEP-00	6010
			SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	99.	ppm	MDK	01-SEP-00	6010
L000999-025	26-JUN-00	B-34 (11.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	70.	ppm	MDK	01-SEP-00	6010
L000999-026	26-JUN-00	B-34 (14-14.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	33.	ppm	MDK	01-SEP-00	6010
L000999-027	26-JUN-00	B-76 (2-2.5)	CD	<1.	ppm	MDK	01-SEP-00	6010
			CR	16*.	ppm	MDK	01-SEP-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	491.	ppm	MDK	01-SEP-00	6010
			MOIST.	23.	%	MJF	15-JUL-00	GRAV.
			SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	60.	ppm	MDK	01-SEP-00	6010
L000999-028	26-JUN-00	B-76 (5.5)	CR	13.*	ppm	MDK	01-SEP-00	6010
			MN	370.	ppm	MDK	01-SEP-00	6010
			SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	47.	ppm	MDK	01-SEP-00	6010
L000999-029	26-JUN-00	B-76 (8.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	52.	ppm	MDK	01-SEP-00	6010
L000999-030	26-JUN-00	B-76 (11.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	61.	ppm	MDK	01-SEP-00	6010

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Batch No: L000999

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-031	26-JUN-00	B-76 (14.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	63.	ppm	MDK	01-SEP-00	6010
L000999-032	26-JUN-00	B-76 (17.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	51.	ppm	MDK	01-SEP-00	6010
L000999-033	26-JUN-00	B-76 (20.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	62.	ppm	MDK	01-SEP-00	6010
L000999-034	26-JUN-00	B-76 (23.4-24)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	14.	ppm	MDK	01-SEP-00	6010
L000999-035	26-JUN-00	B-75 (2-2.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			TL	<1.	ppm	MDK	01-SEP-00	6010
			ZN	58.	ppm	MDK	01-SEP-00	6010
L000999-036	26-JUN-00	B-75 (5.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	48.	ppm	MDK	01-SEP-00	6010
L000999-037	26-JUN-00	B-75 (8.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	49.	ppm	MDK	01-SEP-00	6010
L000999-038	26-JUN-00	B-75 (11.5)	SB	5.*	ppm	MDK	01-SEP-00	6010
			ZN	58.	ppm	MDK	01-SEP-00	6010
L000999-039	26-JUN-00	B-75 (14.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	62.	ppm	MDK	01-SEP-00	6010
L000999-040	26-JUN-00	B-75 (17.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	54.	ppm	MDK	01-SEP-00	6010
L000999-041	26-JUN-00	B-75 (20.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	41.	ppm	MDK	01-SEP-00	6010
L000999-042	26-JUN-00	B-75 (23.5)	SB	5.*	ppm	MDK	01-SEP-00	6010
			ZN	57.	ppm	MDK	01-SEP-00	6010
L000999-043	26-JUN-00	B-75 (26-26.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	63.	ppm	MDK	01-SEP-00	6010

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-044	26-JUN-00	B-33 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			AS	<5.	ppm	MDK	01-SEP-00	6010
			BA	755.*	ppm	MDK	01-SEP-00	6010
			BI	<4.	ppm	MDK	01-SEP-00	6010
			CD	2.	ppm	MDK	01-SEP-00	6010
			CO	<5.	ppm	MDK	01-SEP-00	6010
			CR	11.*	ppm	MDK	01-SEP-00	6010
			CU	7.*	ppm	MDK	01-SEP-00	6010
			MN	531.	ppm	MDK	01-SEP-00	6010
			PB	9.	ppm	MDK	01-SEP-00	6010
			SB	3.*	ppm	MDK	01-SEP-00	6010
			V	29.*	ppm	MDK	01-SEP-00	6010
ZN	304.	ppm	MDK	01-SEP-00	6010			
L000999-045	26-JUN-00	B-33 (5.5)	BA	304.*	ppm	MDK	01-SEP-00	6010
			MN	400.	ppm	MDK	01-SEP-00	6010
			SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	389.	ppm	MDK	01-SEP-00	6010
			ZN	304.	ppm	MDK	01-SEP-00	6010
L000999-046	26-JUN-00	B-33 (8.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	28.	ppm	MDK	01-SEP-00	6010
L000999-047	26-JUN-00	B-33 (11.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	47.	ppm	MDK	01-SEP-00	6010
L000999-048	26-JUN-00	B-33 (13-14)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	20.	ppm	MDK	01-SEP-00	6010
L000999-049	27-JUN-00	B-93 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			CD	1.	ppm	MDK	01-SEP-00	6010
			CR	14.*	ppm	MDK	01-SEP-00	6010
			CU	13.*	ppm	MDK	01-SEP-00	6010
			HG	0.60	ppm	EH	17-JUL-00	7471
			MN	344.	ppm	MDK	01-SEP-00	6010
			MOIST.	21.	%	MJF	15-JUL-00	GRAV.
			PB	10.	ppm	MDK	01-SEP-00	6010
			SE	<0.8*	ppm	MDK	01-SEP-00	6010
			TL	<1.	ppm	MDK	01-SEP-00	6010
ZN	242.	ppm	MDK	01-SEP-00	6010			

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L000999-050	27-JUN-00	B-93 (5.5)	HG	<0.05	ppm	EH	17-JUL-00	7471
			MOIST.	20.	%	MJF	15-JUL-00	GRAV.
			ZN	85.	ppm	MDK	01-SEP-00	6010
L000999-051	27-JUN-00	B-93 (8.5)	ZN	49.	ppm	MDK	01-SEP-00	6010
L000999-052	27-JUN-00	B-93 (11.5)	ZN	51.	ppm	MDK	01-SEP-00	6010
L000999-053	27-JUN-00	B-93 (14.5)	ZN	56.	ppm	MDK	01-SEP-00	6010
L000999-054	27-JUN-00	B-93 (15.5-16)	ZN	26.	ppm	MDK	01-SEP-00	6010
L000999-055	27-JUN-00	B-94 (2-2.5)	AG	<0.5	ppm	MDK	01-SEP-00	6010
			CD	12.	ppm	MDK	01-SEP-00	6010
			CR	12.*	ppm	MDK	01-SEP-00	6010
			CU	25.*	ppm	MDK	01-SEP-00	6010
			HG	0.055	ppm	EH	17-JUL-00	7471
			MOIST.	24.	%	MJF	15-JUL-00	GRAV.
			PB	28.	ppm	MDK	01-SEP-00	6010
			SB	4.*	ppm	MDK	01-SEP-00	6010
			SE	<0.8*	ppm	MDK	01-SEP-00	6010
			ZN	789.	ppm	MDK	01-SEP-00	6010
L000999-056	27-JUN-00	B-94 (5.5)	CD	<1.	ppm	MDK	01-SEP-00	6010
			CU	11.*	ppm	MDK	01-SEP-00	6010
			SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	55.	ppm	MDK	01-SEP-00	6010
L000999-057	27-JUN-00	B-94 (8.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	48.	ppm	MDK	01-SEP-00	6010
L000999-058	27-JUN-00	B-94 (11.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	52.	ppm	MDK	01-SEP-00	6010
L000999-059	27-JUN-00	B-94 (17.7-17.5)	SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	166.	ppm	MDK	01-SEP-00	6010
L000999-060	27-JUN-00	B-68 (2-2.5)	CD	302.	ppm	MDK	01-SEP-00	6010
			CO	10.	ppm	MDK	01-SEP-00	6010

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L000999-060	27-JUN-00	B-68 (2-2.5)	MN	1560.	ppm	MDK	01-SEP-00	6010
			SB	4.*	ppm	MDK	01-SEP-00	6010
			ZN	14400.	ppm	MDK	01-SEP-00	6010
L000999-061	27-JUN-00	B-68 (5.5)	CD	2.	ppm	MDK	01-SEP-00	6010
			CO	7.	ppm	MDK	01-SEP-00	6010
			MN	445.	ppm	MDK	01-SEP-00	6010
			SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	247.	ppm	MDK	01-SEP-00	6010
L000999-062	27-JUN-00	B-68 (8.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	71.	ppm	MDK	01-SEP-00	6010
L000999-063	27-JUN-00	B-68 (11.5)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	71.	ppm	MDK	01-SEP-00	6010
L000999-064	27-JUN-00	B-68 (14.5)	SB	3.*	ppm	MDK	01-SEP-00	6010
			ZN	35.	ppm	MDK	01-SEP-00	6010
L000999-065	27-JUN-00	B-68 (15.7-16)	SB	2.*	ppm	MDK	01-SEP-00	6010
			ZN	30.	ppm	MDK	01-SEP-00	6010
L000999-066	27-JUN-00	B-78 (2-2.5)	TL	<1.	ppm	MDK	01-SEP-00	6010
			ZN	43.	ppm	MDK	01-SEP-00	6010
L000999-067	27-JUN-00	B-78 (5.5)	ZN	46.	ppm	MDK	01-SEP-00	6010
L000999-068	27-JUN-00	B-78 (8.5)	ZN	39.	ppm	MDK	01-SEP-00	6010
L000999-069	27-JUN-00	B-78 (11.5)	ZN	40.	ppm	MDK	01-SEP-00	6010
L000999-070	27-JUN-00	B-78 (14.5)	ZN	65.	ppm	MDK	01-SEP-00	6010
L000999-071	27-JUN-00	B-78 (17.5)	ZN	44.	ppm	MDK	01-SEP-00	6010
L000999-072	27-JUN-00	B-78 (19.5-20)	ZN	36.	ppm	MDK	01-SEP-00	6010
L000999-073	27-JUN-00	B-77 (2-2.5)	TL	<1.	ppm	MDK	01-SEP-00	6010
			ZN	45.	ppm	MDK	01-SEP-00	6010

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LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L000999-074	27-JUN-00	B-77 (5.5)	ZN	43.	ppm	MDK	01-SEP-00	6010
L000999-075	27-JUN-00	B-77 (8.5)	ZN	48.	ppm	MDK	01-SEP-00	6010
L000999-076	27-JUN-00	B-77 (11.5)	ZN	62.	ppm	MDK	01-SEP-00	6010
L000999-077	27-JUN-00	B-77 (14.5)	ZN	57.	ppm	MDK	01-SEP-00	6010
L000999-078	27-JUN-00	B-77 (17.5)	ZN	55.	ppm	MDK	01-SEP-00	6010
L000999-079	27-JUN-00	B-77 (19.7-20)	ZN	15.	ppm	MDK	01-SEP-00	6010

(\*) Quality control data indicates a possible bias. See QC report for details.

Unless otherwise noted results are not blank corrected.

  
 Approved

  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DAYS ANALYZED	HOLD DAYS	METHOD
WG000763-1		Matrix Spike	AG	114	%Recovery	MDK	01-SEP-00		6010
			AS	93	%Recovery	MDK	01-SEP-00		6010
			EA	101	%Recovery	MDK	01-SEP-00		6010
			BI	107	%Recovery	MDK	01-SEP-00		6010
			CD	89	%Recovery	MDK	01-SEP-00		6010
			CN-	92	%Recovery	DC	07-JUL-00		335.2
			CO	95	%Recovery	MDK	01-SEP-00		6010
			CR	111	%Recovery	MDK	01-SEP-00		6010
			CU	117	%Recovery	MDK	01-SEP-00		6010
			HG	104	%Recovery	EH	17-JUL-00		7471
			MN	119	%Recovery	MDK	01-SEP-00		6010
			NI	96	%Recovery	MDK	01-SEP-00		6010
			PB	94	%Recovery	MDK	01-SEP-00		6010
			SB	49*	%Recovery	MDK	01-SEP-00		6010
			SE	73*	%Recovery	MDK	01-SEP-00		6010
			SN	102	%Recovery	MDK	01-SEP-00		6010
			TL	86	%Recovery	MDK	01-SEP-00		6010
			V	112	%Recovery	MDK	01-SEP-00		6010
			ZN	103	%Recovery	MDK	01-SEP-00		6010
			WG000763-2		Prep Blank	AG	<0.5	ppm	MDK
AS	<5.0	ppm				MDK	01-SEP-00		6010
EA	<5.0	ppm				MDK	01-SEP-00		6010
BI	<4.0	ppm				MDK	01-SEP-00		6010
CD	<1.0	ppm				MDK	01-SEP-00		6010
CN-	<0.04	ppm				DC	07-JUL-00		335.2
CO	<5.0	ppm				MDK	01-SEP-00		6010
CR	<5.0	ppm				MDK	01-SEP-00		6010
CU	<5.0	ppm				MDK	01-SEP-00		6010
HG	<0.05	ppm				EH	17-JUL-00		7471
MN	<5.0	ppm				MDK	01-SEP-00		6010
NI	<5.0	ppm				MDK	01-SEP-00		6010
PB	<5.0	ppm				MDK	01-SEP-00		6010
SB	<0.8	ppm				MDK	01-SEP-00		6010
SE	<0.8	ppm				MDK	01-SEP-00		6010
SN	<5.0	ppm				MDK	01-SEP-00		6010
TL	<1.0	ppm				MDK	01-SEP-00		6010
V	<5.0	ppm				MDK	01-SEP-00		6010
ZN	<5.0	ppm				MDK	01-SEP-00		6010

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Encycle/Texas

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Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD	
WG000763-3		Lab Control Sample	AG	105	% Recovery	MDK	01-SEP-00	6010	6010	
			AS	105	% Recovery	MDK	01-SEP-00	6010	6010	
			BA	110	% Recovery	MDK	01-SEP-00	6010	6010	
			BI	95	% Recovery	MDK	01-SEP-00	6010	6010	
			CD	103	% Recovery	MDK	01-SEP-00	6010	6010	
			CN-	89	% Recovery	DC	07-JUL-00	335.2	335.2	6010
			CO	102	% Recovery	MDK	01-SEP-00	6010	6010	
			CR	110	% Recovery	MDK	01-SEP-00	6010	6010	
			CU	115	% Recovery	MDK	01-SEP-00	6010	6010	
			HG	107	% Recovery	EH	17-JUL-00	7471	7471	6010
			MN	112	% Recovery	MDK	01-SEP-00	6010	6010	
			NI	104	% Recovery	MDK	01-SEP-00	6010	6010	
			PB	105	% Recovery	MDK	01-SEP-00	6010	6010	
			SB	154**	% Recovery	MDK	01-SEP-00	6010	6010	
			SE	80	% Recovery	MDK	01-SEP-00	6010	6010	
			SN	116	% Recovery	MDK	01-SEP-00	6010	6010	
			TL	111	% Recovery	MDK	01-SEP-00	6010	6010	
			V	110	% Recovery	MDK	01-SEP-00	6010	6010	
			ZN	98	% Recovery	MDK	01-SEP-00	6010	6010	
			WG000763-5		Matrix Spike Duplicate	AG	1.4	% RPD	MDK	01-SEP-00
AS	2.3	% RPD				MDK	01-SEP-00	6010	6010	
BA	<1	% RPD				MDK	01-SEP-00	6010	6010	
BI	1.5	% RPD				MDK	01-SEP-00	6010	6010	
CD	3.1	% RPD				MDK	01-SEP-00	6010	6010	
CN-	<1	% RPD				DC	07-JUL-00	335.2	335.2	
CO	2.4	% RPD				MDK	01-SEP-00	6010	6010	
CR	2.2	% RPD				MDK	01-SEP-00	6010	6010	
CU	1.2	% RPD				MDK	01-SEP-00	6010	6010	
HG	12	% RPD				EH	17-JUL-00	7471	7471	
MN	<1	% RPD				MDK	01-SEP-00	6010	6010	
NI	2	% RPD				MDK	01-SEP-00	6010	6010	
PB	2.8	% RPD				MDK	01-SEP-00	6010	6010	
SB	2.9	% RPD				MDK	01-SEP-00	6010	6010	
SE	2.5	% RPD				MDK	01-SEP-00	6010	6010	
SN	3.3	% RPD				MDK	01-SEP-00	6010	6010	
TL	1.3	% RPD				MDK	01-SEP-00	6010	6010	
V	1.4	% RPD				MDK	01-SEP-00	6010	6010	
ZN	1.6	% RPD				MDK	01-SEP-00	6010	6010	

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Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DRY	METHOD
WG000763-6		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.050	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010
	WG000763-7		Matrix Spike	AG	117	%Recovery	MDK	01-SEP-00	
			AS	94	%Recovery	MDK	01-SEP-00		6010
			BA	102	%Recovery	MDK	01-SEP-00		6010
			BI	111	%Recovery	MDK	01-SEP-00		6010
			CD	88	%Recovery	MDK	01-SEP-00		6010
			CO	96	%Recovery	MDK	01-SEP-00		6010
			CR	109	%Recovery	MDK	01-SEP-00		6010
			CU	130*	%Recovery	MDK	01-SEP-00		6010
			MN	100	%Recovery	MDK	01-SEP-00		6010
			NI	97	%Recovery	MDK	01-SEP-00		6010
			PB	93	%Recovery	MDK	01-SEP-00		6010
			SB	38*	%Recovery	MDK	01-SEP-00		6010
			SE	74*	%Recovery	MDK	01-SEP-00		6010
			SN	102	%Recovery	MDK	01-SEP-00		6010
			TL	89	%Recovery	MDK	01-SEP-00		6010
			V	109	%Recovery	MDK	01-SEP-00		6010
			ZN	102	%Recovery	MDK	01-SEP-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000763-8		Prep Blank	AG	<0.5	ppm	MDK	01-SEP-00	6010	6010			
			AS	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			BA	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			BI	<4.0	ppm	MDK	01-SEP-00	6010	6010			
			CD	<1.0	ppm	MDK	01-SEP-00	6010	6010			
			CO	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			CR	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			CU	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			MN	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			NI	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			PB	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			SB	<0.8	ppm	MDK	01-SEP-00	6010	6010			
			SE	<0.8	ppm	MDK	01-SEP-00	6010	6010			
			SN	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			TL	<1.0	ppm	MDK	01-SEP-00	6010	6010			
			V	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			ZN	<5.0	ppm	MDK	01-SEP-00	6010	6010			
			WG000763-9		Lab Control Sample	AG	119	%Recovery	MDK	01-SEP-00	6010	6010
						AS	111	%Recovery	MDK	01-SEP-00	6010	6010
						BA	122**	%Recovery	MDK	01-SEP-00	6010	6010
BI	100	%Recovery				MDK	01-SEP-00	6010	6010			
CD	113	%Recovery				MDK	01-SEP-00	6010	6010			
CO	112	%Recovery				MDK	01-SEP-00	6010	6010			
CR	121***	%Recovery				MDK	01-SEP-00	6010	6010			
CU	128***	%Recovery				MDK	01-SEP-00	6010	6010			
HG	111	%Recovery				EH	17-JUL-00	7471	7471			
MN	111	%Recovery				MDK	01-SEP-00	6010	6010			
NI	114	%Recovery				MDK	01-SEP-00	6010	6010			
PB	114	%Recovery				MDK	01-SEP-00	6010	6010			
SB	158**	%Recovery				MDK	01-SEP-00	6010	6010			
SE	84	%Recovery				MDK	01-SEP-00	6010	6010			
SN	121**	%Recovery				MDK	01-SEP-00	6010	6010			
TL	120	%Recovery				MDK	01-SEP-00	6010	6010			
V	126**	%Recovery				MDK	01-SEP-00	6010	6010			
ZN	120	%Recovery				MDK	01-SEP-00	6010	6010			
WG000763-11		Matrix Spike Duplicate				AG	<1	% RPD	MDK	01-SEP-00	6010	6010
						AS	1.3	% RPD	MDK	01-SEP-00	6010	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000763-11		Matrix Spike Duplicate	BA	4.8	% RPD	MDK	01-SEP-00	6010	6010			
			BI	1.5	% RPD	MDK	01-SEP-00	6010	6010			
			CD	2.2	% RPD	MDK	01-SEP-00	6010	6010			
			CO	<1	% RPD	MDK	01-SEP-00	6010	6010			
			CR	2.3	% RPD	MDK	01-SEP-00	6010	6010			
			CU	1	% RPD	MDK	01-SEP-00	6010	6010			
			MN	<1	% RPD	MDK	01-SEP-00	6010	6010			
			NI	1.3	% RPD	MDK	01-SEP-00	6010	6010			
			PB	<1	% RPD	MDK	01-SEP-00	6010	6010			
			SB	6.8	% RPD	MDK	01-SEP-00	6010	6010			
			SE	1.3	% RPD	MDK	01-SEP-00	6010	6010			
			SN	1.7	% RPD	MDK	01-SEP-00	6010	6010			
			TL	1.4	% RPD	MDK	01-SEP-00	6010	6010			
			V	<1	% RPD	MDK	01-SEP-00	6010	6010			
			ZN	1.8	% RPD	MDK	01-SEP-00	6010	6010			
			WG000763-13		Matrix Spike	AG	114	%Recovery	MDK	01-SEP-00	6010	6010
						AS	88	%Recovery	MDK	01-SEP-00	6010	6010
						BA	92	%Recovery	MDK	01-SEP-00	6010	6010
						BI	107	%Recovery	MDK	01-SEP-00	6010	6010
						CD	82	%Recovery	MDK	01-SEP-00	6010	6010
CO	91	%Recovery				MDK	01-SEP-00	6010	6010			
CR	102	%Recovery				MDK	01-SEP-00	6010	6010			
CU	122	%Recovery				MDK	01-SEP-00	6010	6010			
MN	100	%Recovery				MDK	01-SEP-00	6010	6010			
NI	92	%Recovery				MDK	01-SEP-00	6010	6010			
PB	89	%Recovery				MDK	01-SEP-00	6010	6010			
SB	44*	%Recovery				MDK	01-SEP-00	6010	6010			
SE	70*	%Recovery				MDK	01-SEP-00	6010	6010			
SN	97	%Recovery				MDK	01-SEP-00	6010	6010			
TL	85	%Recovery				MDK	01-SEP-00	6010	6010			
V	106	%Recovery				MDK	01-SEP-00	6010	6010			
ZN	94	%Recovery				MDK	01-SEP-00	6010	6010			
WG000763-14		Prep Blank				AG	<0.5	ppm	MDK	01-SEP-00	6010	6010
						AS	<5.0	ppm	MDK	01-SEP-00	6010	6010
						BA	<5.0	ppm	MDK	01-SEP-00	6010	6010
			BI	<4.0	ppm	MDK	01-SEP-00	6010	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycycle/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000763-14		Prep Blank	CO	<5.0	ppm	MDK	01-SEP-00		6010			
			CR	<5.0	ppm	MDK	01-SEP-00		6010			
			CU	<5.0	ppm	MDK	01-SEP-00		6010			
			MN	<5.0	ppm	MDK	01-SEP-00		6010			
			NI	<5.0	ppm	MDK	01-SEP-00		6010			
			PB	<5.0	ppm	MDK	01-SEP-00		6010			
			SB	<0.8	ppm	MDK	01-SEP-00		6010			
			SE	<0.8	ppm	MDK	01-SEP-00		6010			
			SN	<5.0	ppm	MDK	01-SEP-00		6010			
			TL	<1.0	ppm	MDK	01-SEP-00		6010			
			V	<5.0	ppm	MDK	01-SEP-00		6010			
			ZN	<5.0	ppm	MDK	01-SEP-00		6010			
			WG000763-15		Lab Control Sample	AG	108	%Recovery	MDK	01-SEP-00		6010
						AS	96	%Recovery	MDK	01-SEP-00		6010
						BA	109	%Recovery	MDK	01-SEP-00		6010
						BI	91	%Recovery	MDK	01-SEP-00		6010
						CD	97	%Recovery	MDK	01-SEP-00		6010
						CO	100	%Recovery	MDK	01-SEP-00		6010
						CR	109	%Recovery	MDK	01-SEP-00		6010
						CU	121***	%Recovery	MDK	01-SEP-00		6010
MN	110	%Recovery				MDK	01-SEP-00		6010			
NI	101	%Recovery				MDK	01-SEP-00		6010			
PB	101	%Recovery				MDK	01-SEP-00		6010			
SB	146**	%Recovery				MDK	01-SEP-00		6010			
SE	76**	%Recovery				MDK	01-SEP-00		6010			
SN	106	%Recovery				MDK	01-SEP-00		6010			
TL	107	%Recovery				MDK	01-SEP-00		6010			
V	112	%Recovery				MDK	01-SEP-00		6010			
ZN	95	%Recovery	MDK	01-SEP-00		6010						
WG000763-17		Matrix Spike Duplicate	AG	<1	% RPD	MDK	01-SEP-00		6010			
			AS	<1	% RPD	MDK	01-SEP-00		6010			
			BA	<1	% RPD	MDK	01-SEP-00		6010			
			BI	<1	% RPD	MDK	01-SEP-00		6010			
			CD	<1	% RPD	MDK	01-SEP-00		6010			
			CO	<1	% RPD	MDK	01-SEP-00		6010			
			CR	1.1	% RPD	MDK	01-SEP-00		6010			
			CU	<1	% RPD	MDK	01-SEP-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000763-17		Matrix Spike Duplicate	MN	1.7	% RPD	MDK	01-SEP-00		6010
			NI	<1	% RPD	MDK	01-SEP-00		6010
			PB	<1	% RPD	MDK	01-SEP-00		6010
			SB	16	% RPD	MDK	01-SEP-00		6010
			SE	<1	% RPD	MDK	01-SEP-00		6010
			SN	<1	% RPD	MDK	01-SEP-00		6010
			TL	1.9	% RPD	MDK	01-SEP-00		6010
			V	<1	% RPD	MDK	01-SEP-00		6010
			ZN	<1	% RPD	MDK	01-SEP-00		6010
			AG	115	% Recovery	MDK	01-SEP-00		6010
			AS	91	% Recovery	MDK	01-SEP-00		6010
			BA	98	% Recovery	MDK	01-SEP-00		6010
			BI	109	% Recovery	MDK	01-SEP-00		6010
			CD	85	% Recovery	MDK	01-SEP-00		6010
			CO	93	% Recovery	MDK	01-SEP-00		6010
			CR	101	% Recovery	MDK	01-SEP-00		6010
			CU	131*	% Recovery	MDK	01-SEP-00		6010
MN	120	% Recovery	MDK	01-SEP-00		6010			
NI	95	% Recovery	MDK	01-SEP-00		6010			
PB	92	% Recovery	MDK	01-SEP-00		6010			
SB	38*	% Recovery	MDK	01-SEP-00		6010			
SE	72*	% Recovery	MDK	01-SEP-00		6010			
SN	100	% Recovery	MDK	01-SEP-00		6010			
TL	87	% Recovery	MDK	01-SEP-00		6010			
V	102	% Recovery	MDK	01-SEP-00		6010			
ZN	94	% Recovery	MDK	01-SEP-00		6010			
WG000763-20		Prep Blank	AG	<0.5	ppm	MDK	01-SEP-00		6010
			AS	<5.0	ppm	MDK	01-SEP-00		6010
			BA	<5.0	ppm	MDK	01-SEP-00		6010
			BI	<4.0	ppm	MDK	01-SEP-00		6010
			CD	<1.0	% RPD	MDK	01-SEP-00		6010
			CO	<5.0	ppm	MDK	01-SEP-00		6010
			CR	<5.0	ppm	MDK	01-SEP-00		6010
			CU	<5.0	ppm	MDK	01-SEP-00		6010
			MN	<5.0	ppm	MDK	01-SEP-00		6010
			NI	<5.0	ppm	MDK	01-SEP-00		6010
			PB	<5.0	ppm	MDK	01-SEP-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD		
WG000763-20		Prep Blank	SB	<0.8	ppm	MDK	01-SEP-00	6010			
			SE	<0.8	ppm	MDK	01-SEP-00	6010			
			SN	<5.0	ppm	MDK	01-SEP-00	6010			
			TL	<1.0	ppm	MDK	01-SEP-00	6010			
			V	<5.0	ppm	MDK	01-SEP-00	6010			
			ZN	<5.0	ppm	MDK	01-SEP-00	6010			
			AG	109	% Recovery	MDK	01-SEP-00	6010			
			AS	101	% Recovery	MDK	01-SEP-00	6010			
			BA	116	% Recovery	MDK	01-SEP-00	6010			
			BI	95	% Recovery	MDK	01-SEP-00	6010			
WG000763-21		Lab Control Sample	CO	102	% Recovery	MDK	01-SEP-00	6010			
			CD	102	% Recovery	MDK	01-SEP-00	6010			
			CR	114	% Recovery	MDK	01-SEP-00	6010			
			CU	131***	% Recovery	MDK	01-SEP-00	6010			
			MN	108	% Recovery	MDK	01-SEP-00	6010			
			NI	103	% Recovery	MDK	01-SEP-00	6010			
			PB	104	% Recovery	MDK	01-SEP-00	6010			
			SB	147**	% Recovery	MDK	01-SEP-00	6010			
			SE	77**	% Recovery	MDK	01-SEP-00	6010			
			SN	109	% Recovery	MDK	01-SEP-00	6010			
			TL	113	% Recovery	MDK	01-SEP-00	6010			
			V	115	% Recovery	MDK	01-SEP-00	6010			
			ZN	102	% Recovery	MDK	01-SEP-00	6010			
			WG000763-22		Duplicate	MOIST.	<1	% RPD	MJF	15-JUL-00	GRAV.
AG	2.5	% RPD				MDK	01-SEP-00	6010			
AS	<1	% RPD				MDK	01-SEP-00	6010			
BA	1.5	% RPD				MDK	01-SEP-00	6010			
BI	<1	% RPD				MDK	01-SEP-00	6010			
CD	<1	% RPD				MDK	01-SEP-00	6010			
CO	<1	% RPD				MDK	01-SEP-00	6010			
CR	2.7	% RPD				MDK	01-SEP-00	6010			
CU	2	% RPD				MDK	01-SEP-00	6010			
MN	4.4	% RPD				MDK	01-SEP-00	6010			
NI	<1	% RPD				MDK	01-SEP-00	6010			
PB	<1	% RPD				MDK	01-SEP-00	6010			
SB	19	% RPD				MDK	01-SEP-00	6010			
WG000763-23		Matrix Spike Duplicate				AG	2.5	% RPD	MDK	01-SEP-00	6010
						AS	<1	% RPD	MDK	01-SEP-00	6010
			BA	1.5	% RPD	MDK	01-SEP-00	6010			
			BI	<1	% RPD	MDK	01-SEP-00	6010			
			CD	<1	% RPD	MDK	01-SEP-00	6010			
			CO	<1	% RPD	MDK	01-SEP-00	6010			
			CR	2.7	% RPD	MDK	01-SEP-00	6010			
			CU	2	% RPD	MDK	01-SEP-00	6010			
			MN	4.4	% RPD	MDK	01-SEP-00	6010			
			NI	<1	% RPD	MDK	01-SEP-00	6010			
			PB	<1	% RPD	MDK	01-SEP-00	6010			
			SB	19	% RPD	MDK	01-SEP-00	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000763

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000763-23		Matrix Spike Duplicate	SE	1.6	% RPD	MDK	01-SEP-00		6010
			SN	2.4	% RPD	MDK	01-SEP-00		6010
			TL	2.3	% RPD	MDK	01-SEP-00		6010
			V	2.9	% RPD	MDK	01-SEP-00		6010
			ZN	1.2	% RPD	MDK	01-SEP-00		6010

\* Spikes outside acceptance limits due to matrix interference.  
 \*\* LCS within ERA (244), 95% confidence interval.  
 \*\*\* LCS within 20% of actual concentration.

  
 Approved  
  
 Reviewer



September 26, 2000

Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (34), thirty four soil samples collected on June 22, 2000, in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 23, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,



Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: L001065

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001065-001	22-JUN-00	B53 (2-2.5)	AG	<0.5	ppm	MDK	17-AUG-00	6010
			CD	1055.	ppm	MDK	17-AUG-00	6010
			CO	6.	ppm	MDK	17-AUG-00	6010
			CR	12.	ppm	MDK	17-AUG-00	6010
			CU	12.	ppm	MDK	17-AUG-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	430.	ppm	MDK	17-AUG-00	6010
			MOIST.	21.	%	MJF	15-JUL-00	GRAV.
			PB	13.	ppm	MDK	17-AUG-00	6010
			SB	2.*	ppm	MDK	17-AUG-00	6010
			SN	<5.	ppm	MDK	17-AUG-00	6010
ZN	15330.	ppm	MDK	25-SEP-00	6010			
L001065-002	22-JUN-00	B53 (5.5)	CD	16.	ppm	MDK	17-AUG-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	232.	ppm	MDK	17-AUG-00	6010
			MOIST.	15.	%	MJF	15-JUL-00	GRAV.
			SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	172.	ppm	MDK	17-AUG-00	6010
L001065-003	22-JUN-00	B53 (8.5)	CD	1.	ppm	MDK	17-AUG-00	6010
			SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	36.	ppm	MDK	17-AUG-00	6010
L001065-004	22-JUN-00	B53 (11.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	29.	ppm	MDK	17-AUG-00	6010
L001065-005	22-JUN-00	B53 (14.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	29.	ppm	MDK	17-AUG-00	6010
L001065-006	22-JUN-00	B53 (17.5-18)	SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	12.	ppm	MDK	17-AUG-00	6010
L001065-007	22-JUN-00	B54 (2-2.5)	MN	401.	ppm	MDK	17-AUG-00	6010
			SB	2.*	ppm	MDK	17-AUG-00	6010
			SE	<0.8	ppm	MDK	17-AUG-00	6010
			ZN	42.	ppm	MDK	17-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001065

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001065-009	22-JUN-00	B54 (5.5)	MN	155.	ppm	MDK	17-AUG-00	6010
			SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	50.	ppm	MDK	17-AUG-00	6010
L001065-010	22-JUN-00	B54 (8.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	20.	ppm	MDK	17-AUG-00	6010
L001065-011	22-JUN-00	B54 (11.5)	SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	18.	ppm	MDK	17-AUG-00	6010
L001065-012	22-JUN-00	B54 (14-15)	ZN	11.	ppm	MDK	17-AUG-00	6010
L001065-013	22-JUN-00	B85 (2-2.5)	AG	<0.5	ppm	MDK	17-AUG-00	6010
			AS	<5.	ppm	MDK	17-AUG-00	6010
			CD	2.	ppm	MDK	17-AUG-00	6010
			CN-	<0.04	ppm	DC	07-JUL-00	335.2
			CO	5.	ppm	MDK	17-AUG-00	6010
			CR	11.	ppm	MDK	17-AUG-00	6010
			CU	9.	ppm	MDK	17-AUG-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MN	327.	ppm	MDK	17-AUG-00	6010
			MOIST.	20.	%	MJF	15-JUL-00	GRAV.
			NI	10.	ppm	MDK	17-AUG-00	6010
			PB	23.	ppm	MDK	17-AUG-00	6010
			SB	1.*	ppm	MDK	17-AUG-00	6010
			SE	<0.8	ppm	MDK	17-AUG-00	6010
			SN	<5.	ppm	MDK	17-AUG-00	6010
			ZN	149.	ppm	MDK	17-AUG-00	6010
L001065-014	22-JUN-00	B85 (5.5)	HG	<0.05	ppm	EH	17-JUL-00	7471
			MOIST.	22.	%	MJF	15-JUL-00	GRAV.
			SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	2480.	ppm	MDK	17-AUG-00	6010
L001065-015	22-JUN-00	B85 (8.5)	SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	745.	ppm	MDK	17-AUG-00	6010
L001065-016	22-JUN-00	B85 (11.5)	ZN	1040.	ppm	MDK	17-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001065

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001065-017	22-JUN-00	B85 (14.5)	ZN	31.	ppm	MDK	17-AUG-00	6010
L001065-018	22-JUN-00	B85 (17.5-18)	ZN	24.	ppm	MDK	17-AUG-00	6010
L001065-019	22-JUN-00	B87 (2-2.5)	AG	1.	ppm	MDK	17-AUG-00	6010
			CD	39.	ppm	MDK	17-AUG-00	6010
			CO	6.	ppm	MDK	17-AUG-00	6010
			CR	12.	ppm	MDK	17-AUG-00	6010
			MN	805.	ppm	MDK	17-AUG-00	6010
			SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	3500.	ppm	MDK	17-AUG-00	6010
L001065-020	22-JUN-00	B87 (5.5)	AG	<0.5	ppm	MDK	17-AUG-00	6010
			CD	1.	ppm	MDK	17-AUG-00	6010
			MN	312.	ppm	MDK	17-AUG-00	6010
			SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	134.	ppm	MDK	17-AUG-00	6010
L001065-021	22-JUN-00	B87 (8.5)	ZN	93.	ppm	MDK	17-AUG-00	6010
L001065-022	22-JUN-00	B87 (11.5)	ZN	51.	ppm	MDK	17-AUG-00	6010
L001065-023	22-JUN-00	B87 (14.5)	ZN	27.	ppm	MDK	17-AUG-00	6010
L001065-024	22-JUN-00	B87 (16-16.5)	ZN	29.	ppm	MDK	17-AUG-00	6010
L001065-025	22-JUN-00	B46 (2-2.5)	CD	7.	ppm	MDK	17-AUG-00	6010
			HG	<0.05	ppm	EH	17-JUL-00	7471
			MOIST.	17.	%	MJF	15-JUL-00	GRAV.
			SB	<0.8*	ppm	MDK	17-AUG-00	6010
			TL	1.	ppm	MDK	17-AUG-00	6010
			ZN	55.	ppm	MDK	17-AUG-00	6010
L001065-026	22-JUN-00	B46 (5.5)	CD	<1.	ppm	MDK	17-AUG-00	6010
			MOIST.	18.	%	MJF	15-JUL-00	GRAV.
			ZN	37.	ppm	MDK	17-AUG-00	6010
L001065-027	22-JUN-00	B46 (8.5)	ZN	38.	ppm	MDK	17-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001065

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001065-028	22-JUN-00	B46 (11.5)	ZN	26.	ppm	MDK	17-AUG-00	6010
L001065-029	22-JUN-00	B46 (14.5)	ZN	26.	ppm	MDK	17-AUG-00	6010
L001065-030	22-JUN-00	B46 (16-16.5)	ZN	18.	ppm	MDK	17-AUG-00	6010
L001065-031	22-JUN-00	B47 (2-2.5)	CD	<1.	ppm	MDK	17-AUG-00	6010
			CR	15.	ppm	MDK	17-AUG-00	6010
			SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	41.	ppm	MDK	17-AUG-00	6010
L001065-032	22-JUN-00	B47 (5.5)	CR	10.	ppm	MDK	17-AUG-00	6010
			ZN	35.	ppm	MDK	17-AUG-00	6010
L001065-033	22-JUN-00	B47 (8.5)	ZN	35.	ppm	MDK	17-AUG-00	6010
L001065-034	22-JUN-00	B47 (11.5)	ZN	27.	ppm	MDK	17-AUG-00	6010

(\* Quality control data indicate a possible bias. See QC report for details.

Unless otherwise noted results are not blank corrected.

  
Approved

  
Reviewer

ASARCO TECHNICAL SERVICES CENTER  
 ANALYTICAL DATA REPORT  
 Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000732

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000732-1		Matrix Spike	AG	112	%Recovery	MDK	17-AUG-00	6010	
	AS		94	%Recovery	MDK	17-AUG-00	6010		
	BA		97	%Recovery	MDK	17-AUG-00	6010		
	BI		97	%Recovery	MDK	17-AUG-00	6010		
	CD		92	%Recovery	MDK	17-AUG-00	6010		
	CN-		92	%Recovery	DC	07-JUL-00	335.2		
	CO		94	%Recovery	MDK	17-AUG-00	6010		
	CR		114	%Recovery	MDK	17-AUG-00	6010		
	CU		111	%Recovery	MDK	17-AUG-00	6010		
	HG		104	%Recovery	EH	17-JUL-00	7471		
	MN		121	%Recovery	MDK	17-AUG-00	6010		
	NI		96	%Recovery	MDK	17-AUG-00	6010		
	PB		93	%Recovery	MDK	17-AUG-00	6010		
	SB		62*	%Recovery	MDK	17-AUG-00	6010		
	SE		80	%Recovery	MDK	17-AUG-00	6010		
	SN		95	%Recovery	MDK	17-AUG-00	6010		
	TL		84	%Recovery	MDK	17-AUG-00	6010		
	V		109	%Recovery	MDK	17-AUG-00	6010		
	ZN		105	%Recovery	MDK	17-AUG-00	6010		
	WG000732-2			Prep Blank	AG	<0.5	ppm	MDK	17-AUG-00
AS		<5.0	ppm		MDK	17-AUG-00	6010		
BA		<5.0	ppm		MDK	17-AUG-00	6010		
BI		<4.0	ppm		MDK	17-AUG-00	6010		
CD		<1.0	ppm		MDK	17-AUG-00	6010		
CN-		<0.04	ppm		DC	07-JUL-00	335.2		
CO		<5.0	ppm		MDK	17-AUG-00	6010		
CR		<5.0	ppm		MDK	17-AUG-00	6010		
CU		<5.0	ppm		MDK	17-AUG-00	6010		
HG		<0.05	ppm		EH	17-JUL-00	7471		
MN		<5.0	ppm		MDK	17-AUG-00	6010		
NI		<5.0	ppm		MDK	17-AUG-00	6010		
PB		<5.0	ppm		MDK	17-AUG-00	6010		
SB		<0.8	ppm		MDK	17-AUG-00	6010		
SE		<0.8	ppm		MDK	17-AUG-00	6010		
SN		<5.0	ppm		MDK	17-AUG-00	6010		
TL		<1.0	ppm		MDK	17-AUG-00	6010		
V		<5.0	ppm		MDK	17-AUG-00	6010		
ZN		<5.0	ppm		MDK	17-AUG-00	6010		

ASARCO TECHNICAL SERVICES CENTER

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Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000732

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD	
WG000732-3		Lab Control Sample	AG	99	% Recovery	MDK	17-AUG-00	6010	6010	
			AS	94	% Recovery	MDK	17-AUG-00	6010	6010	
			BA	95	% Recovery	MDK	17-AUG-00	6010	6010	6010
			BI	92	% Recovery	MDK	17-AUG-00	6010	6010	6010
			CD	94	% Recovery	MDK	17-AUG-00	6010	6010	6010
			CN-	89	% Recovery	DC	07-JUL-00	335.2	335.2	335.2
			CO	93	% Recovery	MDK	17-AUG-00	6010	6010	6010
			CR	94	% Recovery	MDK	17-AUG-00	6010	6010	6010
			CU	98	% Recovery	MDK	17-AUG-00	6010	6010	6010
			HG	91	% Recovery	EH	17-JUL-00	7471	7471	7471
			MN	92	% Recovery	MDK	17-AUG-00	6010	6010	6010
			NI	111	% Recovery	MDK	17-AUG-00	6010	6010	6010
			PB	96	% Recovery	MDK	17-AUG-00	6010	6010	6010
			SB	117	% Recovery	MDK	17-AUG-00	6010	6010	6010
			SE	81	% Recovery	MDK	17-AUG-00	6010	6010	6010
			SN	101	% Recovery	MDK	17-AUG-00	6010	6010	6010
			TL	97	% Recovery	MDK	17-AUG-00	6010	6010	6010
			V	99	% Recovery	MDK	17-AUG-00	6010	6010	6010
			ZN	94	% Recovery	MDK	17-AUG-00	6010	6010	6010
			WG000732-4		Duplicate	MOIST.	<1	% RPD		15-JUL-00
AG	1.4	% RPD				MDK	17-AUG-00	6010	6010	
WG000732-5		Matrix Spike Duplicate	AS	1.1	% RPD	MDK	17-AUG-00	6010	6010	
			BA	2	% RPD	MDK	17-AUG-00	6010	6010	
			BI	<1	% RPD	MDK	17-AUG-00	6010	6010	
			CD	3.2	% RPD	MDK	17-AUG-00	6010	6010	
			CN-	<1	% RPD	DC	07-JUL-00	335.2	335.2	
			CO	2.3	% RPD	MDK	17-AUG-00	6010	6010	
			CR	1.5	% RPD	MDK	17-AUG-00	6010	6010	
			CU	1.8	% RPD	MDK	17-AUG-00	6010	6010	
			HG	12	% RPD	EH	17-JUL-00	7471	7471	
			MN	<1	% RPD	MDK	17-AUG-00	6010	6010	
			NI	2.3	% RPD	MDK	17-AUG-00	6010	6010	
			PB	<1	% RPD	MDK	17-AUG-00	6010	6010	
			SB	<1	% RPD	MDK	17-AUG-00	6010	6010	
			SE	<1	% RPD	MDK	17-AUG-00	6010	6010	
			SN	<1	% RPD	MDK	17-AUG-00	6010	6010	
TL	1.3	% RPD	MDK	17-AUG-00	6010	6010				

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000732

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	MOID DAYS	METHOD
WG000732-5		Matrix Spike Duplicate	V	1.3	% RPD	MDK	17-AUG-00		6010
			ZN	<1	% RPD	MDK	17-AUG-00		6010
WG000732-6		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CN-	0.04	ppm				335.2
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010
WG000732-7		Matrix Spike	AG	109	%Recovery	MDK	17-AUG-00		6010
			AS	92	%Recovery	MDK	17-AUG-00		6010
			BA	93	%Recovery	MDK	17-AUG-00		6010
			BI	96	%Recovery	MDK	17-AUG-00		6010
			CD	93	%Recovery	MDK	17-AUG-00		6010
			CO	90	%Recovery	MDK	17-AUG-00		6010
			CR	108	%Recovery	MDK	17-AUG-00		6010
			CU	107	%Recovery	MDK	17-AUG-00		6010
			MN	124	%Recovery	MDK	17-AUG-00		6010
			NI	92	%Recovery	MDK	17-AUG-00		6010
			PB	90	%Recovery	MDK	17-AUG-00		6010
			SB	60*	%Recovery	MDK	17-AUG-00		6010
			SE	78	%Recovery	MDK	17-AUG-00		6010
			SN	94	%Recovery	MDK	17-AUG-00		6010
			TL	83	%Recovery	MDK	17-AUG-00		6010
			V	107	%Recovery	MDK	17-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000732

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000732-7		Matrix Spike	ZN	102	%Recovery	MDK	17-AUG-00		6010
		Prep Blank	AG	<0.5	ppm	MDK	17-AUG-00		6010
			AS	<5.0	ppm	MDK	17-AUG-00		6010
			BA	<5.0	ppm	MDK	17-AUG-00		6010
			BI	<4.0	ppm	MDK	17-AUG-00		6010
			CD	<1.0	ppm	MDK	17-AUG-00		6010
			CO	<5.0	ppm	MDK	17-AUG-00		6010
			CR	<5.0	ppm	MDK	17-AUG-00		6010
			CU	<5.0	ppm	MDK	17-AUG-00		6010
			MN	<5.0	ppm	MDK	17-AUG-00		6010
			NI	<5.0	ppm	MDK	17-AUG-00		6010
			PB	<5.0	ppm	MDK	17-AUG-00		6010
			SB	<0.8	ppm	MDK	17-AUG-00		6010
			SE	<0.8	ppm	MDK	17-AUG-00		6010
			SN	<5.0	ppm	MDK	17-AUG-00		6010
			TL	<1.0	ppm	MDK	17-AUG-00		6010
			V	<5.0	ppm	MDK	17-AUG-00		6010
			ZN	<5.0	ppm	MDK	17-AUG-00		6010
WG000732-9		Lab Control Sample	AG	104	%Recovery	MDK	17-AUG-00		6010
			AS	97	%Recovery	MDK	17-AUG-00		6010
			BA	101	%Recovery	MDK	17-AUG-00		6010
			BI	91	%Recovery	MDK	17-AUG-00		6010
			CD	100	%Recovery	MDK	17-AUG-00		6010
			CO	98	%Recovery	MDK	17-AUG-00		6010
			CR	100	%Recovery	MDK	17-AUG-00		6010
			CU	106	%Recovery	MDK	17-AUG-00		6010
			MN	99	%Recovery	MDK	17-AUG-00		6010
			NI	100	%Recovery	MDK	17-AUG-00		6010
			PB	100	%Recovery	MDK	17-AUG-00		6010
			SB	120	%Recovery	MDK	17-AUG-00		6010
			SE	84	%Recovery	MDK	17-AUG-00		6010
			SN	106	%Recovery	MDK	17-AUG-00		6010
			TL	101	%Recovery	MDK	17-AUG-00		6010
			V	105	%Recovery	MDK	17-AUG-00		6010
			ZN	97	%Recovery	MDK	17-AUG-00		6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000732

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000732-11		Matrix Spike Duplicate	AG	1.1	% RPD	MDK	17-AUG-00		6010
			AS	1.8	% RPD	MDK	17-AUG-00		6010
			BA	1.9	% RPD	MDK	17-AUG-00		6010
			BI	<1	% RPD	MDK	17-AUG-00		6010
			CD	5.1	% RPD	MDK	17-AUG-00		6010
			CO	1.2	% RPD	MDK	17-AUG-00		6010
			CR	3.6	% RPD	MDK	17-AUG-00		6010
			CU	<1	% RPD	MDK	17-AUG-00		6010
			MN	2.2	% RPD	MDK	17-AUG-00		6010
			NI	2.1	% RPD	MDK	17-AUG-00		6010
			PB	2.1	% RPD	MDK	17-AUG-00		6010
			SB	<1	% RPD	MDK	17-AUG-00		6010
			SE	2.6	% RPD	MDK	17-AUG-00		6010
			SN	1.6	% RPD	MDK	17-AUG-00		6010
			TL	1	% RPD	MDK	17-AUG-00		6010
			V	2.9	% RPD	MDK	17-AUG-00		6010
			ZN	2.4	% RPD	MDK	17-AUG-00		6010

*Caro Kelly*  
 Approved  
*Caro Kelly*  
 Reviewer

\* Spikes for Sb were outside acceptance limits due to matrix interference.



September 26, 2000

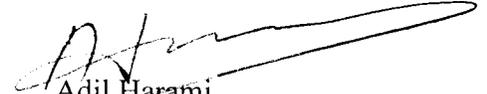
Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (36), thirty six soil samples collected on June 16, 2000, in association with the Encycle Project # CC00064.0001 and received by the laboratory on June 20, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,

  
Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001027

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001027-001	16-JUN-00	B-139 (2-2.5)	AG	<0.5	ppm	MDK	17-AUG-00	6010
			CR	14.*	ppm	MDK	17-AUG-00	6010
			SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	48.	ppm	MDK	17-AUG-00	6010
L001027-002	16-JUN-00	B-139 (5.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	50.	ppm	MDK	17-AUG-00	6010
L001027-003	16-JUN-00	B-139 (8.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	42.	ppm	MDK	17-AUG-00	6010
L001027-004	16-JUN-00	B-139 (11.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	45.	ppm	MDK	17-AUG-00	6010
L001027-005	16-JUN-00	B-139 (14.5)	SB	1.*	ppm	MDK	17-AUG-00	6010
			ZN	49.	ppm	MDK	17-AUG-00	6010
L001027-006	16-JUN-00	B-139 (17.5)	SB	2.*	ppm	MDK	17-AUG-00	6010
			ZN	62.	ppm	MDK	17-AUG-00	6010
L001027-007	16-JUN-00	B-139 (20.5)	SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	53.	ppm	MDK	17-AUG-00	6010
L001027-009	16-JUN-00	B-133 (2-2.5)	AG	1.	ppm	MDK	17-AUG-00	6010
			BA	486.	ppm	MDK	17-AUG-00	6010
			CR	64.*	ppm	MDK	17-AUG-00	6010
			NI	32.*	ppm	MDK	17-AUG-00	6010
			SB	<0.8*	ppm	MDK	17-AUG-00	6010
			TL	2.	ppm	MDK	17-AUG-00	6010
			ZN	16.	ppm	MDK	17-AUG-00	6010
L001027-010	16-JUN-00	B-136 (2-2.5)	AG	1.	ppm	MDK	17-AUG-00	6010
			CR	35.*	ppm	MDK	17-AUG-00	6010
			HG	0.13*	ppm	VPK	07-JUL-00	7471
			SB	<0.8*	ppm	MDK	17-AUG-00	6010
			ZN	276.	ppm	MDK	17-AUG-00	6010
L001027-011	16-JUN-00	B-131 (2-2.5)	AG	<0.5	ppm	MDK	17-AUG-00	6010
			CO	7.	ppm	MDK	17-AUG-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001027

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	ANALYZED	METHOD
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(\*) Quality control data indicates a possible bias. See QC report for details.

Unless otherwise noted results are not blank corrected.

  
Approved

  
Reviewer

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000731

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE		HOLD			
							ANALYZED	DAYS				
WG000731-1		Matrix Spike	AG	108	%Recovery	MDK	17-AUG-00		6010			
			AS	97	%Recovery	MDK	17-AUG-00		6010			
			BA	94	%Recovery	MDK	17-AUG-00		6010			
			BI	98	%Recovery	MDK	17-AUG-00		6010			
			CD	92	%Recovery	MDK	17-AUG-00		6010			
			CO	91	%Recovery	MDK	17-AUG-00		6010			
			CR	177*	%Recovery	MDK	17-AUG-00		6010			
			CU	111	%Recovery	MDK	17-AUG-00		6010			
			HG	112	%Recovery	VPK	07-JUL-00		7471			
			MN	101	%Recovery	MDK	17-AUG-00		6010			
			NI	111	%Recovery	MDK	17-AUG-00		6010			
			PB	95	%Recovery	MDK	17-AUG-00		6010			
			SB	62*	%Recovery	MDK	17-AUG-00		6010			
			SE	82	%Recovery	MDK	17-AUG-00		6010			
			SN	97	%Recovery	MDK	17-AUG-00		6010			
			TL	84	%Recovery	MDK	17-AUG-00		6010			
			V	99	%Recovery	MDK	17-AUG-00		6010			
			ZN	102	%Recovery	MDK	17-AUG-00		6010			
			WG000731-2		Prep Blank	AG	<0.5	ppm	MDK	17-AUG-00		6010
						AS	<5.0	ppm	MDK	17-AUG-00		6010
BA	<5.0	ppm				MDK	17-AUG-00		6010			
BI	<4.0	ppm				MDK	17-AUG-00		6010			
CD	<1.0	ppm				MDK	17-AUG-00		6010			
CO	<5.0	ppm				MDK	17-AUG-00		6010			
CR	<5.0	ppm				MDK	17-AUG-00		6010			
CU	<5.0	ppm				MDK	17-AUG-00		6010			
HG	<0.05	ppm				VPK	07-JUL-00		7471			
MN	<5.0	ppm				MDK	17-AUG-00		6010			
NI	<5.0	ppm				MDK	17-AUG-00		6010			
PB	<5.0	ppm				MDK	17-AUG-00		6010			
SB	<0.8	ppm				MDK	17-AUG-00		6010			
SE	<0.8	ppm				MDK	17-AUG-00		6010			
SN	<5.0	ppm				MDK	17-AUG-00		6010			
TL	1.9	ppm				MDK	17-AUG-00		6010			
V	<5.0	ppm				MDK	17-AUG-00		6010			
ZN	<5.0	ppm				MDK	17-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000731

LAB NO.	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000731-3		Lab Control Sample	AG	102	% Recovery	MDK	17-AUG-00		6010			
			AS	97	% Recovery	MDK	17-AUG-00		6010			
			BA	97	% Recovery	MDK	17-AUG-00		6010			
			BI	98	% Recovery	MDK	17-AUG-00		6010			
			CD	97	% Recovery	MDK	17-AUG-00		6010			
			CO	99	% Recovery	MDK	17-AUG-00		6010			
			CR	97	% Recovery	MDK	17-AUG-00		6010			
			CU	104	% Recovery	MDK	17-AUG-00		6010			
			HG	124**	% Recovery	VPK	07-JUL-00		7471			
			MN	102	% Recovery	MDK	17-AUG-00		6010			
			NI	100	% Recovery	MDK	17-AUG-00		6010			
			PB	99	% Recovery	MDK	17-AUG-00		6010			
			SB	121**	% Recovery	MDK	17-AUG-00		6010			
			SE	85	% Recovery	MDK	17-AUG-00		6010			
			SN	111	% Recovery	MDK	17-AUG-00		6010			
			TL	99	% Recovery	MDK	17-AUG-00		6010			
			V	98	% Recovery	MDK	17-AUG-00		6010			
			ZN	96	% Recovery	MDK	17-AUG-00		6010			
			WG000731-5		Matrix Spike Duplicate	AG	<1	% RPD	MDK	17-AUG-00		6010
						AS	2.4	% RPD	MDK	17-AUG-00		6010
BA	2.3	% RPD				MDK	17-AUG-00		6010			
BI	2.3	% RPD				MDK	17-AUG-00		6010			
CD	2.9	% RPD				MDK	17-AUG-00		6010			
CO	<1	% RPD				MDK	17-AUG-00		6010			
CR	5.1	% RPD				MDK	17-AUG-00		6010			
CU	<1	% RPD				MDK	17-AUG-00		6010			
HG	28***	% RPD				VPK	07-JUL-00		7471			
MN	1.6	% RPD				MDK	17-AUG-00		6010			
NI	5.3	% RPD				MDK	17-AUG-00		6010			
PB	3.1	% RPD				MDK	17-AUG-00		6010			
SB	7.1	% RPD				MDK	17-AUG-00		6010			
SE	2.4	% RPD				MDK	17-AUG-00		6010			
SN	1.5	% RPD				MDK	17-AUG-00		6010			
TL	<1	% RPD				MDK	17-AUG-00		6010			
V	1.1	% RPD				MDK	17-AUG-00		6010			
ZN	3.6	% RPD				MDK	17-AUG-00		6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000731

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000731-6		Reporting Limit	AG	0.50	ppm				6010			
			AS	5.0	ppm				6010			
			BA	5.0	ppm					6010		
			BI	4.0	ppm					6010		
			CD	1.0	ppm					6010		
			CO	5.0	ppm					6010		
			CR	5.0	ppm					6010		
			CU	5.0	ppm					6010		
			HG	0.05	ppm					7471		
			MN	5.0	ppm					6010		
			NI	5.0	ppm					6010		
			PB	5.0	ppm					6010		
			SE	0.80	ppm					6010		
			SN	0.80	ppm					6010		
			TL	5.0	ppm					6010		
			V	1.0	ppm					6010		
			ZN	5.0	ppm					6010		
			WG000731-7		Matrix Spike	AG	100	%Recovery	MDK	17-AUG-00		6010
						AS	90	%Recovery	MDK	17-AUG-00		6010
						BA	92	%Recovery	MDK	17-AUG-00		6010
BI	99	%Recovery				MDK	17-AUG-00		6010			
CD	90	%Recovery				MDK	17-AUG-00		6010			
CO	93	%Recovery				MDK	17-AUG-00		6010			
CR	307*	%Recovery				MDK	17-AUG-00		6010			
CU	104	%Recovery				MDK	17-AUG-00		6010			
MN	108	%Recovery				MDK	17-AUG-00		6010			
NI	130*	%Recovery				MDK	17-AUG-00		6010			
PB	93	%Recovery				MDK	17-AUG-00		6010			
SE	73*	%Recovery				MDK	17-AUG-00		6010			
SN	76	%Recovery				MDK	17-AUG-00		6010			
TL	96	%Recovery				MDK	17-AUG-00		6010			
V	86	%Recovery				MDK	17-AUG-00		6010			
ZN	101	%Recovery				MDK	17-AUG-00		6010			
	90	%Recovery				MDK	17-AUG-00		6010			
AG	<0.5	ppm				MDK	17-AUG-00		6010			
AS	<5.0	ppm				MDK	17-AUG-00		6010			

WG000731-8

Prep Blank

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000731

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000731-8		Prep Blank	BA	<5.0	ppm	MDK	17-AUG-00		6010			
			BI	<4.0	ppm	MDK	17-AUG-00		6010			
			CD	<1.0	ppm	MDK	17-AUG-00		6010			
			CO	<5.0	ppm	MDK	17-AUG-00		6010			
			CR	<5.0	ppm	MDK	17-AUG-00		6010			
			CU	<5.0	ppm	MDK	17-AUG-00		6010			
			MN	<5.0	ppm	MDK	17-AUG-00		6010			
			NI	<5.0	ppm	MDK	17-AUG-00		6010			
			PB	<5.0	ppm	MDK	17-AUG-00		6010			
			SB	<0.8	ppm	MDK	17-AUG-00		6010			
			SE	<0.8	ppm	MDK	17-AUG-00		6010			
			SN	<5.0	ppm	MDK	17-AUG-00		6010			
			TL	<1	ppm	MDK	17-AUG-00		6010			
			V	<5.0	ppm	MDK	17-AUG-00		6010			
			ZN	<5.0	ppm	MDK	17-AUG-00		6010			
			WG000731-9		Lab Control Sample	AG	105	%Recovery	MDK	17-AUG-00		6010
						AS	101	%Recovery	MDK	17-AUG-00		6010
						BA	105	%Recovery	MDK	17-AUG-00		6010
						BI	95	%Recovery	MDK	17-AUG-00		6010
						CD	102	%Recovery	MDK	17-AUG-00		6010
CO	101	%Recovery				MDK	17-AUG-00		6010			
CR	104	%Recovery				MDK	17-AUG-00		6010			
CU	108	%Recovery				MDK	17-AUG-00		6010			
MN	100	%Recovery				MDK	17-AUG-00		6010			
NI	103	%Recovery				MDK	17-AUG-00		6010			
PB	104	%Recovery				MDK	17-AUG-00		6010			
SB	135**	%Recovery				MDK	17-AUG-00		6010			
SE	87	%Recovery				MDK	17-AUG-00		6010			
SN	110	%Recovery				MDK	17-AUG-00		6010			
TL	106	%Recovery				MDK	17-AUG-00		6010			
V	106	%Recovery				MDK	17-AUG-00		6010			
ZN	97	%Recovery				MDK	17-AUG-00		6010			
WG000731-11		Matrix Spike Duplicate				AG	<1	% RPD	MDK	17-AUG-00		6010
						AS	2	% RPD	MDK	17-AUG-00		6010
						BA	<1	% RPD	MDK	17-AUG-00		6010
			BI	3.2	% RPD	MDK	17-AUG-00		6010			
CD	<1	% RPD	MDK	17-AUG-00		6010						

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000731

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	NO. OF DAYS	METHOD
WG000731-11		Matrix Spike Duplicate	CO	<1	% RPD	MDK	17-AUG-00		6010
			CR	3.3	% RPD	MDK	17-AUG-00		6010
			CU	1.2	% RPD	MDK	17-AUG-00		6010
			MN	3.4	% RPD	MDK	17-AUG-00		6010
			NI	<1	% RPD	MDK	17-AUG-00		6010
			PB	2	% RPD	MDK	17-AUG-00		6010
			SB	5.2	% RPD	MDK	17-AUG-00		6010
			SE	1.1	% RPD	MDK	17-AUG-00		6010
			SN	1.6	% RPD	MDK	17-AUG-00		6010
			TL	1	% RPD	MDK	17-AUG-00		6010
			V	<1	% RPD	MDK	17-AUG-00		6010
			ZN	<1	% RPD	MDK	17-AUG-00		6010

\* Spikes outside acceptance limits due to matrix interference.  
 \*\* LCS for Sb and Hg is within ERA (244), 95% confidence interval.  
 \*\*\* Duplicate Spike recovery for Hg was out of range due to non-homogeneity of spiked sample.

  
 Approved  
  
 Reviewer



September 26, 2000

Mr. Ken Brandner  
**Arcadis Geraghty & Miller**

Attached are the analytical results and quality control data for (17), seventeen soil samples collected on June 30, 2000, in association with the Encycle Project # CC00064.0001 and received by the laboratory on July 6, 2000.

Please note that CN- and Hg were analyzed on the samples as received, while all other metals were analyzed on dried samples.

If you need further information, please call (801) 263-5266.

Sincerely,

  
Adil Harami  
Senior Chemist

Attach.

cc: GRStanga (w/attach.)



ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001039

LAR NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD						
L001039-001	30-JUN-00	B122 (0-0.5)	AG	1.	ppm	MDK	02-SEP-00	6010						
			AS	<5.	ppm	MDK	02-SEP-00	6010						
			CD	23.	ppm	MDK	02-SEP-00	6010						
			CR	16.	ppm	MDK	02-SEP-00	6010						
			CU	56.*	ppm	MDK	02-SEP-00	6010						
			HG	0.38*	ppm	EH	27-JUL-00	7471						
			MN	442.	ppm	MDK	02-SEP-00	6010						
			MOIST.	16.	%	DC	19-JUL-00	GRAV.						
			PB	118.	ppm	MDK	02-SEP-00	6010						
			SB	4.*	ppm	MDK	02-SEP-00	6010						
			SE	1.*	ppm	MDK	02-SEP-00	6010						
			SN	5.	ppm	MDK	02-SEP-00	6010						
			ZN	1560.	ppm	MDK	02-SEP-00	6010						
			L001039-002	30-JUN-00	B122 (2-2.5)	CD	1.	ppm	MDK	02-SEP-00	6010			
						CR	16.	ppm	MDK	02-SEP-00	6010			
						CU	14.*	ppm	MDK	02-SEP-00	6010			
HG	<0.05*	ppm				EH	27-JUL-00	7471						
MN	385.	ppm				MDK	02-SEP-00	6010						
MOIST.	20.	%				DC	19-JUL-00	GRAV.						
SB	3.*	ppm				MDK	02-SEP-00	6010						
V	18.	ppm				MDK	02-SEP-00	6010						
ZN	71.	ppm				MDK	02-SEP-00	6010						
L001039-003	30-JUN-00	B122 (5.5)				CD	<1.	ppm	MDK	02-SEP-00	6010			
						CR	17.	ppm	MDK	02-SEP-00	6010			
						HG	<0.05*	ppm	EH	27-JUL-00	7471			
						MOIST.	25.	%	DC	19-JUL-00	GRAV.			
						SB	3.*	ppm	MDK	02-SEP-00	6010			
						ZN	54.	ppm	MDK	02-SEP-00	6010			
						L001039-004	30-JUN-00	B122 (8.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	52.	ppm				MDK	02-SEP-00	6010			
			L001039-005	30-JUN-00	B122 (11.5)				CO	9.	ppm	MDK	02-SEP-00	6010
									MN	464.	ppm	MDK	02-SEP-00	6010
						SB	3.*	ppm	MDK	02-SEP-00	6010			
						ZN	61.	ppm	MDK	02-SEP-00	6010			

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001039

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001039-006	30-JUN-00	B122 (14.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			TL	<1.*	ppm	MDK	02-SEP-00	6010
			ZN	56.	ppm	MDK	02-SEP-00	6010
L001039-007	30-JUN-00	B122 (17.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			TL	<1.	ppm	MDK	02-SEP-00	6010
			ZN	62.	ppm	MDK	02-SEP-00	6010
L001039-008	30-JUN-00	B122 (20.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	47.	ppm	MDK	02-SEP-00	6010
L001039-009	30-JUN-00	B122 (23-23.5)	SB	2.*	ppm	MDK	02-SEP-00	6010
			ZN	29.	ppm	MDK	02-SEP-00	6010
L001039-010	30-JUN-00	B123 (0-0.5)	AG	1.	ppm	MDK	02-SEP-00	6010
			CD	27.	ppm	MDK	02-SEP-00	6010
			CR	15.	ppm	MDK	02-SEP-00	6010
			CU	86.*	ppm	MDK	02-SEP-00	6010
			HG	0.74*	ppm	EH	27-JUL-00	7471
			MN	319.	ppm	MDK	02-SEP-00	6010
			MOIST.	19.	%	DC	19-JUL-00	GRAV.
			PB	189.	ppm	MDK	02-SEP-00	6010
			SB	4.*	ppm	MDK	02-SEP-00	6010
			SE	<0.8*	ppm	MDK	02-SEP-00	6010
			ZN	1750.	ppm	MDK	02-SEP-00	6010
L001039-011	30-JUN-00	B123 (2-2.5)	CR	14.	ppm	MDK	02-SEP-00	6010
			HG	<0.05*	ppm	EH	27-JUL-00	7471
			MN	407.	ppm	MDK	02-SEP-00	6010
			MOIST.	22.	%	DC	19-JUL-00	GRAV.
			SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	70.	ppm	MDK	02-SEP-00	6010
L001039-012	30-JUN-00	B123 (5.5)	CR	17.	ppm	MDK	02-SEP-00	6010
			HG	<0.05*	ppm	EH	27-JUL-00	7471
			MOIST.	22.	%	DC	19-JUL-00	GRAV.
			SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	52.	ppm	MDK	02-SEP-00	6010

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: L001039

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	METHOD
L001039-013	30-JUN-00	B123 (8.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	52.	ppm	MDK	02-SEP-00	6010
L001039-014	30-JUN-00	B123 (11.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	60.	ppm	MDK	02-SEP-00	6010
L001039-015	30-JUN-00	B123 (14.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	61.	ppm	MDK	02-SEP-00	6010
L001039-016	30-JUN-00	B123 (17.5)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	52.	ppm	MDK	02-SEP-00	6010
L001039-017	30-JUN-00	B123 (19.7-20)	SB	3.*	ppm	MDK	02-SEP-00	6010
			ZN	34.	ppm	MDK	02-SEP-00	6010

(\*) Quality control data indicates a possible bias. See QC report for details.

Unless otherwise noted results are not blank corrected.

  
 Approved

  
 Reviewer

ASARCO TECHNICAL SERVICES CENTER  
ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000780

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000780-1		Matrix Spike	AG	106	%Recovery	MDK	02-SEP-00	6010	
			AS	89	%Recovery	MDK	02-SEP-00	6010	
			BA	98	%Recovery	MDK	02-SEP-00	6010	
			BI	102	%Recovery	MDK	02-SEP-00	6010	
			CD	84	%Recovery	MDK	02-SEP-00	6010	
			CO	94	%Recovery	MDK	02-SEP-00	6010	
			CR	103	%Recovery	MDK	02-SEP-00	6010	
			CU	129*	%Recovery	MDK	02-SEP-00	6010	
			HG	87	%Recovery	EH	27-JUL-00	7471	
			MN	108	%Recovery	MDK	02-SEP-00	6010	
			NI	96	%Recovery	MDK	02-SEP-00	6010	
			PB	92	%Recovery	MDK	02-SEP-00	6010	
			SB	61*	%Recovery	MDK	02-SEP-00	6010	
			SE	71*	%Recovery	MDK	02-SEP-00	6010	
			SN	96	%Recovery	MDK	02-SEP-00	6010	
			TL	87	%Recovery	MDK	02-SEP-00	6010	
			V	103	%Recovery	MDK	02-SEP-00	6010	
			ZN	93	%Recovery	MDK	02-SEP-00	6010	
			WG000780-2		Prep Blank	AG	<0.5	ppm	MDK
AS	<5.0	ppm				MDK	02-SEP-00	6010	
BA	<5.0	ppm				MDK	02-SEP-00	6010	
BI	<4.0	ppm				MDK	02-SEP-00	6010	
CD	<1.0	ppm				MDK	02-SEP-00	6010	
CO	<5.0	ppm				MDK	02-SEP-00	6010	
CR	<5.0	ppm				MDK	02-SEP-00	6010	
CU	<5.0	ppm				MDK	02-SEP-00	6010	
HG	<0.05	ppm				EH	27-JUL-00	7471	
MN	<5.0	ppm				MDK	02-SEP-00	6010	
NI	<5.0	ppm				MDK	02-SEP-00	6010	
PB	<5.0	ppm				MDK	02-SEP-00	6010	
SB	1.6	ppm				MDK	02-SEP-00	6010	
SE	<0.8	ppm				MDK	02-SEP-00	6010	
SN	<5.0	ppm				MDK	02-SEP-00	6010	
TL	1.3	ppm				MDK	02-SEP-00	6010	
V	<5.0	ppm				MDK	02-SEP-00	6010	
ZN	<5.0	ppm				MDK	02-SEP-00	6010	

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycle/Texas

Technical Services (Project 8201)

Batch No: WG000780

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD			
WG000780-3		Lab Control Sample	AG	95	% Recovery	MDK	02-SEP-00	6010				
			AS	82	% Recovery	MDK	02-SEP-00	6010				
			BA	92	% Recovery	MDK	02-SEP-00	6010				
			BI	96	% Recovery	MDK	02-SEP-00	6010				
			CD	86	% Recovery	MDK	02-SEP-00	6010				
			CO	96	% Recovery	MDK	02-SEP-00	6010				
			CR	97	% Recovery	MDK	02-SEP-00	6010				
			CU	111	% Recovery	MDK	02-SEP-00	6010				
			HG	122**	% Recovery	EH	27-JUL-00	7471				
			MN	93	% Recovery	MDK	02-SEP-00	6010				
			NI	94	% Recovery	MDK	02-SEP-00	6010				
			PB	88	% Recovery	MDK	02-SEP-00	6010				
			SB	108	% Recovery	MDK	02-SEP-00	6010				
			SE	72**	% Recovery	MDK	02-SEP-00	6010				
			SN	99	% Recovery	MDK	02-SEP-00	6010				
			TL	84	% Recovery	MDK	02-SEP-00	6010				
			V	99	% Recovery	MDK	02-SEP-00	6010				
			ZN	90	% Recovery	MDK	02-SEP-00	6010				
			WG000780-4		Duplicate	MOIST.	2.6	% RPD	DC	19-JUL-00		GRAV.
			WG000780-5		Matrix Spike Duplicate	AG	2.3	% RPD	MDK	02-SEP-00	6010	
AS	2.4	% RPD				MDK	02-SEP-00	6010				
BA	2.1	% RPD				MDK	02-SEP-00	6010				
BI	2.2	% RPD				MDK	02-SEP-00	6010				
CD	2.3	% RPD				MDK	02-SEP-00	6010				
CO	1.9	% RPD				MDK	02-SEP-00	6010				
CR	2	% RPD				MDK	02-SEP-00	6010				
CU	3	% RPD				MDK	02-SEP-00	6010				
MN	1.2	% RPD				MDK	02-SEP-00	6010				
NI	2.6	% RPD				MDK	02-SEP-00	6010				
PB	1.3	% RPD				MDK	02-SEP-00	6010				
SB	3.1	% RPD				MDK	02-SEP-00	6010				
SE	2.4	% RPD				MDK	02-SEP-00	6010				
SN	3.3	% RPD				MDK	02-SEP-00	6010				
TL	<1	% RPD				MDK	02-SEP-00	6010				
V	2.3	% RPD				MDK	02-SEP-00	6010				
ZN	2.2	% RPD				MDK	02-SEP-00	6010				

ASARCO TECHNICAL SERVICES CENTER

ANALYTICAL DATA REPORT

Encycie/Texas

Technical Services (Project 8201)

Batch No: WG000780

LAB NO	DATE COLLECTED	DESCRIPTION	PARAMETER	VALUE	UNITS	ANALYST	DATE ANALYZED	HOLD DAYS	METHOD
WG000780-6		Reporting Limit	AG	0.50	ppm				6010
			AS	5.0	ppm				6010
			BA	5.0	ppm				6010
			BI	4.0	ppm				6010
			CD	1.0	ppm				6010
			CO	5.0	ppm				6010
			CR	5.0	ppm				6010
			CU	5.0	ppm				6010
			HG	0.05	ppm				7471
			MN	5.0	ppm				6010
			NI	5.0	ppm				6010
			PB	5.0	ppm				6010
			SB	0.80	ppm				6010
			SE	0.80	ppm				6010
			SN	5.0	ppm				6010
			TL	1.0	ppm				6010
			V	5.0	ppm				6010
			ZN	5.0	ppm				6010

*James Baker*  
Approved

*James Baker*  
Reviewed

\* Spikes outside acceptance limits due to matrix interference.  
 \*\* LCS is within ERA (244, and 245), 95% confidence intervals.





Laboratory Task Order No. \_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_

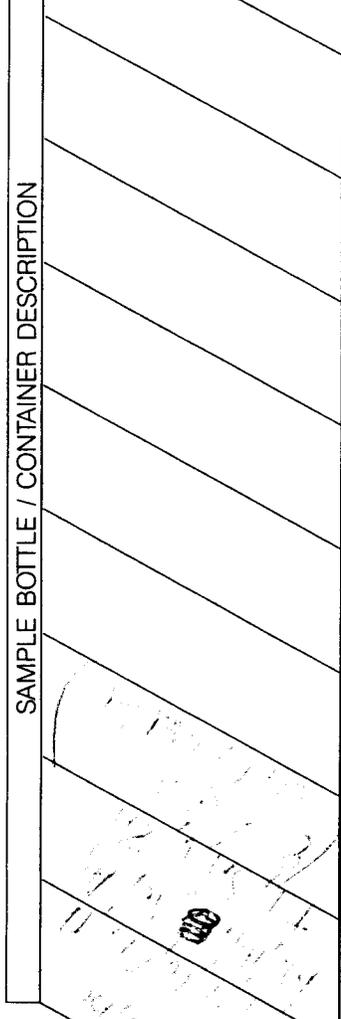
# CHAIN-OF-CUSTODY RECORD

Project Number \_\_\_\_\_

Project Location \_\_\_\_\_

Laboratory \_\_\_\_\_

Sampler(s)/Affiliation \_\_\_\_\_



SAMPLE BOTTLE / CONTAINER DESCRIPTION

SAMPLE IDENTITY	Code	Date/Time Sampled	Lab ID	TOTAL
100-100		7/16/00		
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