

ENGINEERING CHANGE NOTICE

1. ECN 611438

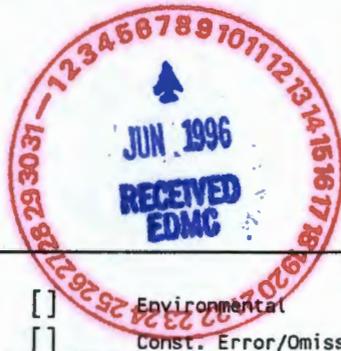
Proj. ECN N/A

2. ECN Category (mark one) Supplemental <input checked="" type="checkbox"/> Direct Revision <input type="checkbox"/> Change ECN <input type="checkbox"/> Temporary <input type="checkbox"/> Standby <input type="checkbox"/> Supersedure <input type="checkbox"/> Cancel/Void <input type="checkbox"/>	3. Originator's Name, Organization, MSIN, and Telephone No. T.J. Wood 8H400/RD1CA-E52692 S3-24 373-7492 <i>04/29/96</i>	3a. USQ Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4. Date April 29, 1996	
	5. Project Title/No./Work Order No. NA	6. Bldg./Sys./Fac. No. NA	7. Approval Designator QD	
	8. Document Numbers Changed by this ECN (includes sheet no. and rev.) WHC-SD-EN-AP-161, Rev 0	9. Related ECN No(s). 611443	10. Related PO No. NA	

11a. Modification Work <input type="checkbox"/> Yes (fill out Blk. 11b) <input checked="" type="checkbox"/> No (NA Blks. 11b, 11c, 11d)	11b. Work Package No. NA	11c. Modification Work Complete NA _____ Cog. Engineer Signature & Date	11d. Restored to Original Condition (Temp. or Standby ECN only) NA _____ Cog. Engineer Signature & Date
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12. Description of Change
 WHC-SD-EN-AP-161, Rev 0, "Fitness-for-Intended-Use Evaluation Recommendations for Hanford Site Wells." Increase scope of document to include attached Appendix H.

NOTE: The WHC-SD-EN-AP-161 document title was changed to "...Hanford Site Wells" from "...Hanford Site 600 Area Wells." The basis behind the change was this document includes other areas of work, e.g., 100, 200, 300, 400, 700, 1100 areas, Ale, North Slope, etc.

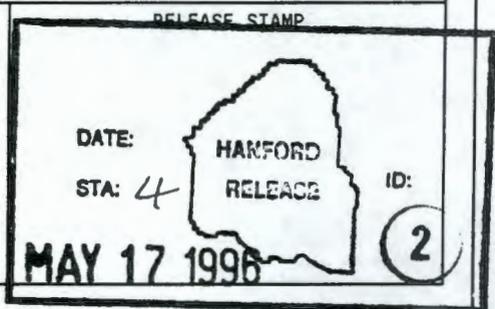


13a. Justification (mark one)

Criteria Change <input checked="" type="checkbox"/>	Design Improvement <input type="checkbox"/>	Environmental <input type="checkbox"/>	Facility Deactivation <input type="checkbox"/>
As-Found <input type="checkbox"/>	Facilitate Const <input type="checkbox"/>	Const. Error/Omission <input type="checkbox"/>	Design Error/Omission <input type="checkbox"/>

13b. Justification Details
 Expands plan application in accordance with WAC 173-160 well decommissioning criteria.

14. Distribution (include name, MSIN, and no. of copies)
 See Distribution Sheet



ENGINEERING CHANGE NOTICE

15. Design Verification Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	16. Cost Impact <table style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;">ENGINEERING</td> <td style="width: 50%; text-align: center;">CONSTRUCTION</td> </tr> <tr> <td>Additional <input type="checkbox"/> \$ NA</td> <td>Additional <input type="checkbox"/> \$</td> </tr> <tr> <td>Savings <input type="checkbox"/> \$</td> <td>Savings <input type="checkbox"/> \$</td> </tr> </table>	ENGINEERING	CONSTRUCTION	Additional <input type="checkbox"/> \$ NA	Additional <input type="checkbox"/> \$	Savings <input type="checkbox"/> \$	Savings <input type="checkbox"/> \$	17. Schedule Impact (days) Improvement <input type="checkbox"/> NA Delay <input type="checkbox"/>
ENGINEERING	CONSTRUCTION							
Additional <input type="checkbox"/> \$ NA	Additional <input type="checkbox"/> \$							
Savings <input type="checkbox"/> \$	Savings <input type="checkbox"/> \$							

18. Change Impact Review: Indicate the related documents (other than the engineering documents identified on Side 1) that will be affected by the change described in Block 12. Enter the affected document number in Block 19.

SDD/DD <input type="checkbox"/>	Seismic/Stress Analysis <input type="checkbox"/>	Tank Calibration Manual <input type="checkbox"/>
Functional Design Criteria <input type="checkbox"/>	Stress/Design Report <input type="checkbox"/>	Health Physics Procedure <input type="checkbox"/>
Operating Specification <input type="checkbox"/>	Interface Control Drawing <input type="checkbox"/>	Spares Multiple Unit Listing <input type="checkbox"/>
Criticality Specification <input type="checkbox"/>	Calibration Procedure <input type="checkbox"/>	Test Procedures/Specification <input type="checkbox"/>
Conceptual Design Report <input type="checkbox"/>	Installation Procedure <input type="checkbox"/>	Component Index <input type="checkbox"/>
Equipment Spec. <input type="checkbox"/>	Maintenance Procedure <input type="checkbox"/>	ASME Coded Item <input type="checkbox"/>
Const. Spec. <input type="checkbox"/>	Engineering Procedure <input type="checkbox"/>	Human Factor Consideration <input type="checkbox"/>
Procurement Spec. <input type="checkbox"/>	Operating Instruction <input type="checkbox"/>	Computer Software <input type="checkbox"/>
Vendor Information <input type="checkbox"/>	Operating Procedure <input type="checkbox"/>	Electric Circuit Schedule <input type="checkbox"/>
OM Manual <input type="checkbox"/>	Operational Safety Requirement <input type="checkbox"/>	ICRS Procedure <input type="checkbox"/>
FSAR/SAR <input type="checkbox"/>	IEFD Drawing <input type="checkbox"/>	Process Control Manual/Plan <input type="checkbox"/>
Safety Equipment List <input type="checkbox"/>	Cell Arrangement Drawing <input type="checkbox"/>	Process Flow Chart <input type="checkbox"/>
Radiation Work Permit <input type="checkbox"/>	Essential Material Specification <input type="checkbox"/>	Purchase Requisition <input type="checkbox"/>
Environmental Impact Statement <input type="checkbox"/>	Fac. Proc. Samp. Schedule <input type="checkbox"/>	Tickler File <input type="checkbox"/>
Environmental Report <input type="checkbox"/>	Inspection Plan <input type="checkbox"/>	
Environmental Permit <input type="checkbox"/>	Inventory Adjustment Request <input type="checkbox"/>	

19. Other Affected Documents: (NOTE: Documents listed below will not be revised by this ECN.) Signatures below indicate that the signing organization has been notified of other affected documents listed below.

Document Number/Revision	Document Number/Revision	Document Number/Revision
NA		

20. Approvals

Signature	Date	Signature	Date
<u>OPERATIONS AND ENGINEERING</u>		<u>ARCHITECT-ENGINEER</u>	
Cog. Engineer D. E. Skoglie <i>David Skoglie</i>	04/29/96	QA	
Cog. Engineer T. J. Wood <i>T.J. Wood</i>	4-30/96		
Cog. Mgr. M. G. Gardner <i>M.G. Gardner</i>	04/29/96	Safety	
QA W. R. Thackaberry <i>W.R. Thackaberry</i>	5/2/96	Design	
Safety N/A		Environ.	
Environ. N/A		Other	
Other D. G. Horton <i>D.G. Horton</i>	5/1/96		
M. T. York <i>M. York</i>	5/1/96		
S. P. Luttrell <i>D. Skoglie for per telecon 04:05</i>	04/30/96		
J. A. Rigger <i>D.E. Skoglie for per telecon 06:35</i>	05/01/96		
		<u>DEPARTMENT OF ENERGY</u>	
		Signature or a Control Number that tracks the Approval Signature	
		M. J. Furman <i>D.E. Skoglie for Mr. M.J. Furman</i>	05/15/96
		<i>per telecon @ 10:55</i>	
		<u>ADDITIONAL</u>	
		R. D. Hildebrand <i>R. D. Hildebrand</i>	5-16-96
		K. M. Thompson <i>K.M. Thompson</i>	5/17/96
		J.M. Clark <i>J.M. Clark</i>	5/13/97

WHC-SD-EN-AP-161, Rev 0, Appendix H

Subject: WELL DECOMMISSIONING PLANNED FOR THIRD AND FOURTH QUARTER FY 1996
BY WHC WELL SERVICES

WHC-SD-EN-AP-161, Rev 0, Appendix H lists Hanford Site wells selected for decommissioning during the third and fourth quarters of FY 1996 under the well decommissioning charter of WHC Well Services.

Protection of the Hanford Site groundwater resources and assessment of the effects of their use or contamination upon public safety are required by Federal and State regulations and U.S. Department of Energy (DOE) policy, "Hanford Site Groundwater Protection Management Program," (DOE, 1989).

Compliance with constraints applicable to the use of existing wells requires assessment as to the suitability for use and needs for rehabilitation, remediation or decommissioning of existing groundwater wells and other boreholes potentially affecting aquifers beneath the Hanford Site.

The Hanford Facility RCRA Permit became effective and enforceable on September 28, 1994. The permit is written in two parts. The first part is the *Dangerous Waste Portion of the Resource Conservation and Recovery Act Permit for the Treatment, Storage, and Disposal of Dangerous Waste* and is issued by the Washington State Department of Ecology (Ecology). The second part is the *Hazardous and Solid Waste Amendments Portion of the Resource Conservation and Recovery Act Permit for the Treatment, Storage, and Disposal of Hazardous Waste*, and is issued by the Environmental Protection Agency (EPA). Part one specifies requirements for the inspection, maintenance, remediation, and decommissioning of wells subject to the permit in Part II F. The permit requires that wells subject to the permit, permittee shall achieve full compliance with Chapter 173-160 WAC and Chapter 18.104 RCW by the year 2012. Part two of the permit specifies well construction, maintenance and decommissioning requirements in Attachment A part B.c.

The Second Responsiveness Summary for the subject permit provided by the Washington State Department of Ecology (Ecology) states that orphan wells have been identified as those wells which are not claimed and are not in use and that these wells are considered "RCRA" wells by the Hanford Administration. Approximately 395 wells have been designated "orphan". Ecology goes on to state that they "will pursue enforcement action outside of this permit to assess and remediate and/or abandon (to Chapter 173-160 WAC standards), where applicable, those wells not being addressed by this permit."

The "Hanford Well Remediation and Decommissioning Plan," WHC-SD-EN-AP-122, provides requirements utilized to evaluate wells in this document for decommissioning.

NOTE: Substitution of Abandonment materials is allowed if (1) materials substituted meet WAC 173-160 requirements, (2) is directed by WHC, and (3) is documented on the daily Field Activity Report form.

A map of the TY Farm (200 West) (Figure 1), construction summary drawings, resource protection groundwater well structure fitness for use checklists for

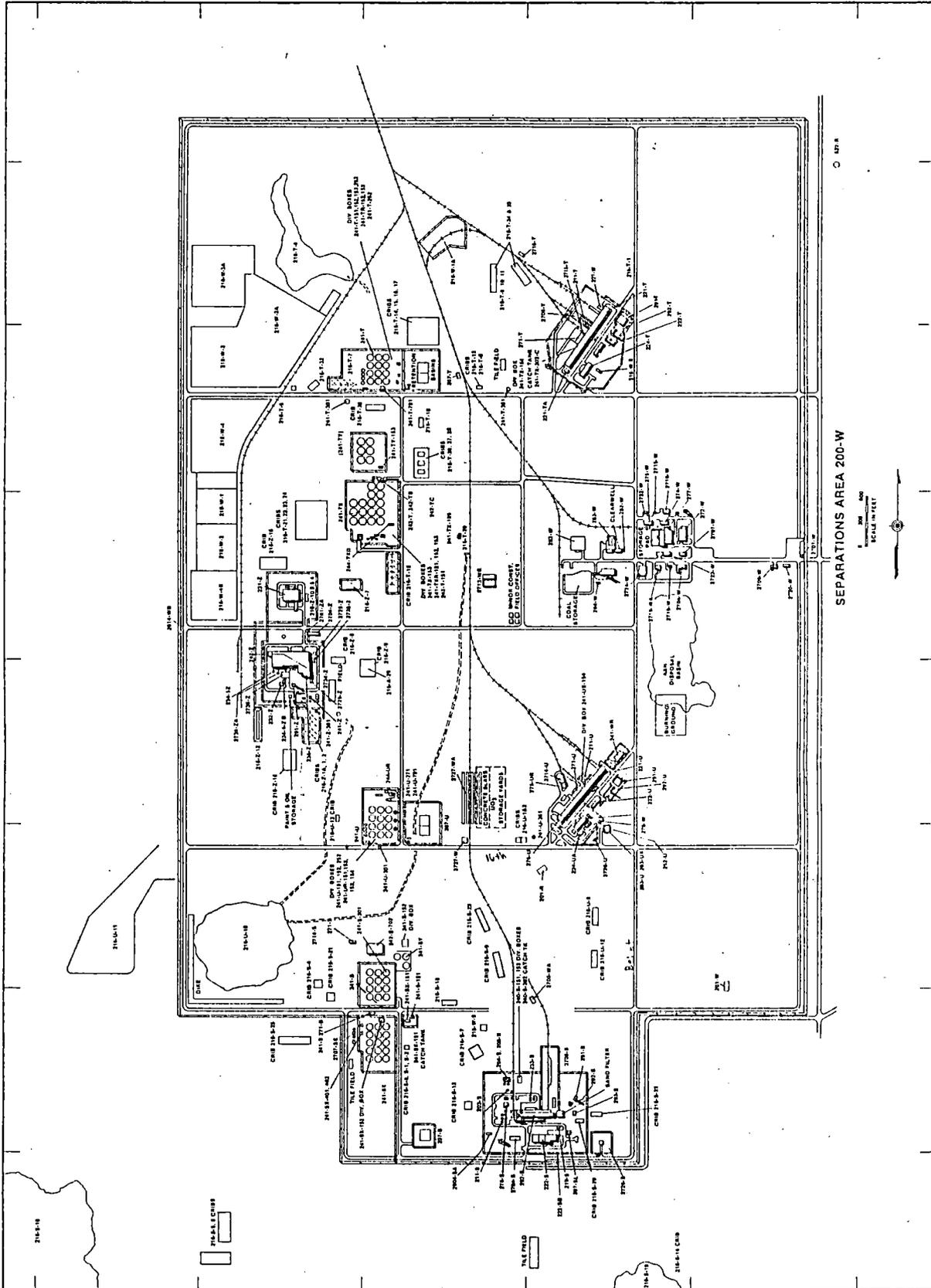
each well, and a diagram of the decommissioning process to be followed for each well are included in Attachment 1. Table 1 provides specific well information. Selection of wells to be decommissioned used one or more of the following criteria (wells selected meet items 1, 3, and 5):

1. No declared owner or use, i.e., orphan status (RCRA).
2. Located in the 600 Area.
3. Deep boreholes lacking annular seals that have the potential for interconnection of aquifers or upward leakage from confined aquifers.
4. Relatively near Columbia or Yakima Rivers or North of Gable Butte/Gable Mountain and/or within ~5 kilometers of the rivers.
5. Relatively near waste burial sites.
6. Wells that are a safety hazard.

Table 1. Wells Recommended for Decommissioning

Well Number	Hanford Coords. N/S E/W	Date Drilled	Depth Drilled	Casing size	Well ID/ Type	Owner	Recommended Disposition
299-W15-97	N42,355.00 W75,936.00 T12N, R25E, S1, SE, NW	12/60	70.00 ft	2.0 in	A7396/UN	orphan	decommission
299-W15-98	N42,395.00 W75,905.00 T12N, R25E, S1, SE, NW	01/61	70.00 ft	2.0 in	A7397/UN	orphan	decommission
299-W15-99	N42,364.00 W75,922.00 T12N, R25E, S1, SE, NW	12/60	70.00 ft	2.0 in	A7398/UN	orphan	decommission
299-W15-100	N42,377.00 W75,910.00 T12N, R25E, S1, SE, NW	12/60	70.00 ft	2.0 in	A7399/UN	orphan	decommission
299-W15-759	N42,352.00 W75,941.00 T12N, R25E, S1, SE, NW	12/60	70.00 ft	2.0 in	B2759/UN	orphan	decommission
299-W15-760	N42,360.00 W75,926.60 T12N, R25E, S1, SE, NW	12/60	70.00 ft	2.0 in	B2760/UN	orphan	decommission
299-W15-761	N42,371.80 W75,911.40 T12N, R25E, S1, SE, NW	12/60	70.00 ft	2.0 in	B2761/UN	orphan	decommission

Figure 1. WELL LOCATION MAP - TY FARM



ATTACHMENT 1

Fitness-for-Intended Use
Evaluation Recommendations
for Hanford Site Wells

299-W15-97	Page 7
299-W15-98	Page 11
299-W15-99	Page 15
299-W15-100	Page 19
299-W15-759	Page 23
299-W15-760	Page 27
299-W15-761	Page 31

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID A-7396	2. Well Name 299-W15-97
Page 1 of 2		
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u>) <u>No potential user identified</u></p>		
<p>4. Is well presently in use? <input type="checkbox"/> <u>No</u>) <u>No use identified</u></p>		
<p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u>) <u>No documentation of annular seal</u></p>		
<p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u>) <u>Well terminates within upper sediment</u></p>		
<p>5b. Aquifer/strata penetrated permanently sealed? <input type="checkbox"/> <u>No</u>) <u>No seals documented</u></p>		
<p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>		
<p>5d. Casing overlap more than 8 ft; packed and grouted? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u>) <u>Well is open at top</u></p>		
<p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u>) <u>No annular seal documented</u></p>		
<p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u>) <u>Drilled before applicable date of WAC 173-303</u></p>		
<p>7c. Well properly identified? <input type="checkbox"/> <u>No</u>) <u>No permanent identification</u></p>		
<p>8. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>		
<p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u>) <u>No cap, or other protection</u></p>		
<p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u>) <u>Inside secured fenced tank farm</u></p>		
<p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>RCRA/CERCLA MONITORING WELL?</p>		
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u>) <u>Drillers discription only</u></p>		

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DIAGRAMMATIC WELL DECOMMISSIONING PROCESS		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Company: <u>Hatch Drilling Co</u> Date Started: <u>21Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>26Dec60</u>	WELL NUMBER: <u>299-W15-97 A7396</u> TEMPORARY WELL NO: <u>#5</u> Hanford Coordinates: N/S <u>N 42,355</u> E/W <u>W 75,936</u> State Coordinates: N <u>136,370.55</u> E <u>566,748.29</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
<p>Depth to water: <u>Not applicable</u></p> <p>DIAGRAMMATIC DECOMMISSIONING ACTIVITIES (Depths from ground surface)</p> <p>[1] Clean out borehole to total depth</p> <p>[2] Perforate 2-in casing from 70-ft back to 1-ft</p> <p>[3] Place cement grout from 70-ft back to 1-ft</p> <p>[4] Cut casing at 1-ft. place marker and fill to grade</p> <p>NOTE: Order of work to be determined by field conditions.</p> <p>DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. 6-in casing parted at 20-ft, 36-ft of casing left in hole.</p>		
<p>The diagram shows a vertical well casing with a riser pipe. Key features include: a surface seal at the top; a section of casing from 1-ft to 70-ft depth that is perforated and grouted; a seal at the 70-ft depth; and a broken 6-in casing section from 20-ft to 56-ft depth. The casing ends at 70-ft depth, and the borehole also ends at 70-ft depth.</p>		
<p>Elevation of reference point: (top of casing) [672.00-ft]</p> <p>Height of reference point above ground surface [2.5-ft]</p> <p>Depth of surface seal [ND]</p> <p>Type of surface seal: <u>None documented</u></p> <p>I.D. of surface casing (If present) [ND]</p> <p>I.D. of riser pipe: [2-in]</p> <p>Type of riser pipe: <u>Carbon steel</u></p> <p>Diameter of borehole: [7-in nom]</p> <p>Broken 6-in casing: <u>20-56-ft</u></p> <p>Elevation/depth top of seal Type of seal: <u>Not documented</u></p> <p>No perforations documented:</p> <p>Depth bottom of casing [70-ft]</p> <p>Depth bottom of borehole: [70-ft]</p>		
<p>Drawing By: <u>TJW/2W15-97.PLN</u> Date: <u>23APR96</u></p> <p>Reference: <u>Hanford Wells</u></p>		

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WELL CONSTRUCTION AND COMPLETION SUMMARY		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>21Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>26Dec60</u>	WELL NUMBER: <u>299-W15-97 A7396</u> TEMPORARY WELL NO: <u>#5</u> Hanford Coordinates: N/S <u>N 42,355</u> E/W <u>W 75,936</u> State Coordinates: N <u>136,370.55</u> E <u>566,748.29</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
GENERALIZED STRATIGRAPHY 0-18: 50% SAND, 50% GRAVEL 18-45: SAND, LARGE GRAVEL, COBBLE 45-55: SAND & GRAVEL 55-70: SAND & SILT		Elevation of reference point: <u>[672.00-ft]</u> (top of casing) Height of reference point above <u>[2.5-ft]</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing <u>[ND]</u> (if present) I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Broken 6-in casing: <u>20-56-ft</u> Elevation/depth top of seal Type of seal: <u>Not documented</u> No perforations documented: Depth bottom of casing Depth bottom of borehole: <u>[70-ft]</u>
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. 6-in casing parted at 20-ft, 36-ft of casing left in hole.		
Drawing By: <u>TJW/2W15-97.ASB</u> Date: <u>21Feb96</u> Reference: <u>Hanford Wells</u>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID A-7397	2. Well Name 299-W15-98
Page 1 of 2		
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u>) <u>No potential user identified</u></p>		
<p>4. Is well presently in use? <input type="checkbox"/> <u>No</u>) <u>No use identified</u></p>		
<p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u>) <u>No documentation of annular seal</u></p>		
<p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u>) <u>Well terminates within upper sediment</u></p>		
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<p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>		
<p>5d. Casing overlap more than 8 ft; pecked and grouted? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u>) <u>Well is open at top</u></p>		
<p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u>) <u>No annular seal documented</u></p>		
<p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u>) <u>Drilled before applicable date of WAC 173-303</u></p>		
<p>7c. Well properly identified? <input type="checkbox"/> <u>No</u>) <u>No permanent identification</u></p>		
<p>8. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>		
<p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u>) <u>No cap, or other protection</u></p>		
<p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u>) <u>Inside secured fenced tank farm</u></p>		
<p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
RCRA/CERCLA MONITORING WELL?		
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u>) <u>Drillers discription only</u></p>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID A-7397	2. Well Name 299-W15-98																		
Page 2 of 2																				
<p>12. Is design and construction IAW WAC 173-160-5407 <input type="checkbox"/> <u>N/A</u> <input checked="" type="checkbox"/> <u>Not applicable</u></p> <p>12a. Screen commercially fabricated of material nonreactive to subsurface conditions? <input type="checkbox"/> <u>N/A</u> <input checked="" type="checkbox"/> <u>Not applicable</u></p> <p>12b. If filter pack installed, extends from bottom of screen to at least 3 ft above screen. <input type="checkbox"/> <u>N/A</u> <input checked="" type="checkbox"/> <u>Not applicable</u></p> <p>12c. Well has been developed. <input type="checkbox"/> <u>N/A</u> <input checked="" type="checkbox"/> <u>Not applicable</u></p> <p>12d. Annulus grouted with bentonite or bentonite/cement mixture. <input type="checkbox"/> <u>N/A</u> <input checked="" type="checkbox"/> <u>Not applicable</u></p> <p>13. Does water sample meet established acceptance criteria? Sample is less than 5 NTU and sand free. <input type="checkbox"/> <u>N/A</u> <input checked="" type="checkbox"/> <u>Not applicable</u></p> <p>14. Data Sources Used:</p> <p>Logs:</p> <table style="width:100%; border: none;"> <tr> <td style="width:50%;">Driller's: <u>Hatch / Swain</u></td> <td style="width:15%;">Date: <u>01/04/61</u></td> <td style="width:35%;">Company: <u>Hatch</u></td> </tr> <tr> <td>Geologist: <u>N/A</u></td> <td>Date: _____</td> <td>Company: _____</td> </tr> <tr> <td>Geophysical: <u>N/A</u></td> <td>Date: _____</td> <td>Company: _____</td> </tr> <tr> <td>Television: <u>N/A</u></td> <td>Date: _____</td> <td>Company: _____</td> </tr> </table> <p>Publications: Title, Author, Date <u>HANFORD WELLS, M. A. Chamness and J. K. Merz, August 1993</u></p> <p>Databases: <u>WHC Well Services</u></p> <p>Field Check: <u>WHC Well Services</u> Date: <u>11/11/95</u> Company: <u>WHC</u></p> <p>Other: _____ _____</p>			Driller's: <u>Hatch / Swain</u>	Date: <u>01/04/61</u>	Company: <u>Hatch</u>	Geologist: <u>N/A</u>	Date: _____	Company: _____	Geophysical: <u>N/A</u>	Date: _____	Company: _____	Television: <u>N/A</u>	Date: _____	Company: _____						
Driller's: <u>Hatch / Swain</u>	Date: <u>01/04/61</u>	Company: <u>Hatch</u>																		
Geologist: <u>N/A</u>	Date: _____	Company: _____																		
Geophysical: <u>N/A</u>	Date: _____	Company: _____																		
Television: <u>N/A</u>	Date: _____	Company: _____																		
<p>15. Comments: Identify evaluation criteria addressed by number: <u>Well lacks, proper seals, surface protection, Proper identification.</u> <u>Items: 5, 5c, 6,8,7c.</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>																				
<p>16. Status</p> <table style="width:100%; border: none;"> <tr> <td style="width:45%;">Well is acceptable for intended use</td> <td style="width:10%;"><input type="checkbox"/> <u>No</u></td> <td style="width:45%;"><input checked="" type="checkbox"/> <u>Well lacks seals</u></td> </tr> <tr> <td>Well is acceptable for intended use if variance is granted</td> <td><input type="checkbox"/> <u>NA</u></td> <td><input checked="" type="checkbox"/> <u>Not applicable</u></td> </tr> <tr> <td>Rehabilitation required to continue intended use</td> <td><input type="checkbox"/> <u>No</u></td> <td><input checked="" type="checkbox"/> <u>Not applicable</u></td> </tr> <tr> <td>Remediation required to achieve intended use</td> <td><input type="checkbox"/> <u>No</u></td> <td><input checked="" type="checkbox"/> <u>Well has no identified user</u></td> </tr> <tr> <td>Decommission, well is unneeded or cannot be remediated</td> <td><input type="checkbox"/> <u>Yes</u></td> <td><input checked="" type="checkbox"/> <u>Well has no identified need</u></td> </tr> <tr> <td>Other _____</td> <td><input type="checkbox"/> _____</td> <td>_____</td> </tr> </table>			Well is acceptable for intended use	<input type="checkbox"/> <u>No</u>	<input checked="" type="checkbox"/> <u>Well lacks seals</u>	Well is acceptable for intended use if variance is granted	<input type="checkbox"/> <u>NA</u>	<input checked="" type="checkbox"/> <u>Not applicable</u>	Rehabilitation required to continue intended use	<input type="checkbox"/> <u>No</u>	<input checked="" type="checkbox"/> <u>Not applicable</u>	Remediation required to achieve intended use	<input type="checkbox"/> <u>No</u>	<input checked="" type="checkbox"/> <u>Well has no identified user</u>	Decommission, well is unneeded or cannot be remediated	<input type="checkbox"/> <u>Yes</u>	<input checked="" type="checkbox"/> <u>Well has no identified need</u>	Other _____	<input type="checkbox"/> _____	_____
Well is acceptable for intended use	<input type="checkbox"/> <u>No</u>	<input checked="" type="checkbox"/> <u>Well lacks seals</u>																		
Well is acceptable for intended use if variance is granted	<input type="checkbox"/> <u>NA</u>	<input checked="" type="checkbox"/> <u>Not applicable</u>																		
Rehabilitation required to continue intended use	<input type="checkbox"/> <u>No</u>	<input checked="" type="checkbox"/> <u>Not applicable</u>																		
Remediation required to achieve intended use	<input type="checkbox"/> <u>No</u>	<input checked="" type="checkbox"/> <u>Well has no identified user</u>																		
Decommission, well is unneeded or cannot be remediated	<input type="checkbox"/> <u>Yes</u>	<input checked="" type="checkbox"/> <u>Well has no identified need</u>																		
Other _____	<input type="checkbox"/> _____	_____																		
<p>17. Status Recommendation Done By: Name: <u>T. J. Wood</u> Title: <u>Senior Engineer</u> Date: <u>02/22/96</u></p>																				

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DIAGRAMMATIC WELL DECOMMISSIONING PROCESS		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>27Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>04Jan61</u>	WELL NUMBER: <u>299-W15-98 A7397</u> TEMPORARY WELL NO: <u>#13</u> Hanford Coordinates: N/S <u>N 42,395</u> E/W <u>W 75,905</u> State Coordinates: N <u>136,381.25</u> E <u>566,756.68</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
DIAGRAMMATIC DECOMMISSIONING ACTIVITIES (Depths from ground surface)	<p>The diagram shows a vertical well casing and a riser pipe. The casing is labeled with a depth of 70-ft at the bottom. The riser pipe is labeled with an I.D. of 2-in. The diagram includes various annotations for elevations, depths, and seal types. A reference point is shown at the top of the casing, 2.5-ft above the ground surface. The diagram also shows a surface seal, a cement grout seal, and a natural fill seal. The riser pipe is made of carbon steel. The diameter of the borehole is 7-in nominal. The bottom of the casing is at 70-ft depth, and the bottom of the borehole is also at 70-ft depth. The diagram includes a list of activities and a note about the order of work.</p>	
[1] Establish depth to bottom clean out [2] Perforate 2-in casing from 70-ft back to 1-ft [3] Place cement grout from 70-ft back to 1-ft [4] Cut casing at 1-ft, place marker and fill to grade	Elevation of reference point: <u>[672.00-ft]</u> (top of casing) Height of reference point above <u>[2.5-ft]</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing (If present) <u>[ND]</u> I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing <u>[70-ft]</u> Depth bottom of borehole: <u>[70-ft]</u>	
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
NOTE: Order of work to be determined by field conditions.		
Drawing By: <u>TJW/2W15-98.PLN</u> Date: <u>23Apr96</u> Reference: <u>Hanford Wells</u>		

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WELL CONSTRUCTION AND COMPLETION SUMMARY		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>27Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Location: <u>Pasco, WA</u> Date Complete: <u>04Jan61</u>	WELL NUMBER: <u>299-W15-98 A7397</u> TEMPORARY WELL NO: <u>#13</u> Hanford Coordinates: N/S <u>N 42,395</u> E/W <u>W 75,905</u> State Coordinates: N <u>136,381.25</u> E <u>566,756.68</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
GENERALIZED STRATIGRAPHY Driller's Log 0-18: 50% SAND, 50% GRAVEL 18-45: SAND, LARGE GRAVEL, COBBLE 45-55: SAND & GRAVEL 55-70: SAND & SILT		Elevation of reference point: <u>1672.00-ft</u> (top of casing) Height of reference point above <u>2.5-ft</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing <u>[ND]</u> (If present) I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Elevation/depth top of seal: Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: <u>[70-ft]</u>
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
Drawing By: <u>TJW/2W15-98.ASB</u> Date: <u>21Feb96</u> Reference: <u>Hanford Wells</u>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST		1. Well ID A-7398	2. Well Name 299-W15-99
Page 1 of 2			
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u>) <u>No potential user identified</u></p>			
<p>4. Is well presently in use? <input type="checkbox"/> <u>No</u>) <u>No use identified</u></p>			
<p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u>) <u>No documentation of annular seal</u></p>			
<p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u>) <u>Well terminates within upper sediment</u></p>			
<p>5b. Aquifer/strata penetrated permanently sealed? <input type="checkbox"/> <u>No</u>) <u>No seals documented</u></p>			
<p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>			
<p>5d. Casing overlap more than 8 ft; packed and grouted? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
<p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u>) <u>Well is open at top</u></p>			
<p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u>) <u>No annular seal documented</u></p>			
<p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
<p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u>) <u>Drilled before applicable date of WAC 173-303</u></p>			
<p>7c. Well properly identified? <input type="checkbox"/> <u>No</u>) <u>No permanent identification</u></p>			
<p>8. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>			
<p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u>) <u>No cap, or other protection</u></p>			
<p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u>) <u>Inside secured fenced tank farm</u></p>			
<p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
<p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
<p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>			
<p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>			
<p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>			
<p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
RCRA/CERCLA MONITORING WELL?			
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
<p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>			
<p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u>) <u>Drillers discription only</u></p>			

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID A-7398	2. Well Name 299-W15-99
Page 2 of 2		
12. Is design and construction IAW WAC 173-160-540? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> <u>Not applicable</u>		
12a. Screen commercially fabricated of material nonreactive to subsurface conditions? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> <u>Not applicable</u>		
12b. If filter pack installed, extends from bottom of screen to at least 3 ft above screen. <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> <u>Not applicable</u>		
12c. Well has been developed. <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> <u>Not applicable</u>		
12d. Annulus grouted with bentonite or bentonite/cement mixture. <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> <u>Not applicable</u>		
13. Does water sample meet established acceptance criteria? Sample is less than 5 NTU and sand free. <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> <u>Not applicable</u>		
14. Data Sources Used: Logs: Driller's: <u>Hatch / Swain</u> Date: <u>12/16/60</u> Company: <u>Hatch</u> Geologist: <u>N/A</u> Date: _____ Company: _____ Geophysical: <u>N/A</u> Date: _____ Company: _____ Television: <u>N/A</u> Date: _____ Company: _____ Publications: Title, Author, Date <u>HANFORD WELLS, M. A. Chamness and J. K. Merz, August 1993</u> _____ Databases: <u>WHC Well Services</u> Field Check: <u>WHC Well Services</u> Date: <u>11/11/95</u> Company: <u>WHC</u> Other: _____ _____		
15. Comments: Identify evaluation criteria addressed by number: <u>Well lacks, proper seals, surface protection, Proper identification.</u> <u>Items: 5, 5c, 6,8,7c.</u> _____ _____ _____ _____ _____ _____ _____		
16. Status Well is acceptable for intended use <input type="checkbox"/> <u>No</u> <input type="checkbox"/> <u>Well lacks seals</u> Well is acceptable for intended use if variance is granted <input type="checkbox"/> <u>NA</u> <input type="checkbox"/> <u>Not applicable</u> Rehabilitation required to continue intended use <input type="checkbox"/> <u>No</u> <input type="checkbox"/> <u>Not applicable</u> Remediation required to achieve intended use <input type="checkbox"/> <u>No</u> <input type="checkbox"/> <u>Well has no identified user</u> Decommission, well is unneeded or cannot be remediated <input type="checkbox"/> <u>Yes</u> <input type="checkbox"/> <u>Well has no identified need</u> Other _____ <input type="checkbox"/> _____		
17. Status Recommendation Done By: Name: <u>T. J. Wood</u> Title: <u>Senior Engineer</u> Date: <u>02/22/96</u>		

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DIAGRAMMATIC WELL DECOMMISSIONING PROCESS		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch</u> Company: <u>Hatch Drilling Co</u> Date Started: <u>12Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Location: <u>Pasco, WA</u> Date Complete: <u>16Dec60</u>	WELL NUMBER: <u>299-W15-99 A7398</u> TEMPORARY WELL NO: <u>#7</u> Hanford Coordinates: N/S <u>N 42,364</u> E/W <u>W 75,922</u> State Coordinates: N <u>136,373.64</u> E <u>566,752.89</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u> DIAGRAMMATIC DECOMMISSIONING ACTIVITIES (Depths from ground surface)	<p>The diagram shows a vertical well casing and riser pipe. Step [1] is at the top. Step [2] is at 70 ft depth. Step [3] is at 1 ft depth. Step [4] is at the surface. Annotations include: Elevation of reference point: [672.00-ft] (top of casing); Height of reference point above [2.5-ft] ground surface; Depth of surface seal [ND]; Type of surface seal: None documented; I.D. of surface casing (If present) [ND]; I.D. of riser pipe: [2-in]; Type of riser pipe: Carbon steel; Diameter of borehole: [7-in nom]; Elevation/depth top of seal; Type of seal: Not documented; Assumed natural fill as 6-in casing was pulled; No perforations documented; Depth bottom of casing; Depth bottom of borehole: [70-ft].</p>	[1] Establish depth to bottom, clean out [2] Perforate 2-in casing from 70-ft back to 1-ft [3] Place cement grout from 70-ft back to 1-ft [4] Cut casing at 1-ft. place marker, fill to grade
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
Drawing By: <u>TJW/2W15-99.PLN</u> Date: <u>23Apr96</u> Reference: <u>Hanford Wells</u>		

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WELL CONSTRUCTION AND COMPLETION SUMMARY		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>12Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>16Dec60</u>	WELL NUMBER: <u>299-W15-99 A7398</u> TEMPORARY WELL NO: <u>#7</u> Hanford Coordinates: N/S <u>N 42,364</u> E/W <u>W 75,922</u> State Coordinates: N <u>136,373.64</u> E <u>566,752.89</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
GENERALIZED STRATIGRAPHY 0-18: 50% SAND, 50% GRAVEL 18-45: SAND, LARGE GRAVEL, COBBLE 45-55: SAND & GRAVEL 55-70: SAND SILT & GRAVEL DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		Elevation of reference point: <u>[672.00-ft]</u> (top of casing) Height of reference point above <u>[2.5-ft]</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing (If present) <u>[ND]</u> I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: <u>[70-ft]</u>
Drawing By: <u>TJW/2W15-99.ASB</u> Date: <u>21Feb96</u> Reference: <u>Hanford Wells</u>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST		1. Well ID A-7399	2. Well Name 299-W15-100
Page 1 of 2			
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u>) No potential user identified</p>			
<p>4. Is well presently in use? <input type="checkbox"/> <u>No</u>) No use identified</p>			
<p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u>) No documentation of annular seal</p>			
<p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u>) Well terminates within upper sediment</p>			
<p>5b. Aquifer/strata penetrated permanently sealed? <input type="checkbox"/> <u>No</u>) No seals documented</p>			
<p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u>) No surface seal documented</p>			
<p>5d. Casing overlap more than 8 ft; packed and grouted? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
<p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u>) Well is open at top</p>			
<p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u>) No annular seal documented</p>			
<p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
<p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u>) Drilled before applicable date of WAC 173-303</p>			
<p>7c. Well properly identified? <input type="checkbox"/> <u>No</u>) No permanent identification</p>			
<p>8. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u>) No surface seal documented</p>			
<p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u>) No cap, or other protection</p>			
<p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u>) Inside secured fenced tank farm</p>			
<p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
<p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
<p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u>) Not documented</p>			
<p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u>) Not documented</p>			
<p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u>) Not documented</p>			
<p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
RCRA/CERCLA MONITORING WELL?			
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
<p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>			
<p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u>) Drillers discription only</p>			

RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST		1. Well ID A-7399	2. Well Name 299-W15-100
Page 2 of 2			
<p>12. Is design and construction IAW WAC 173-160-540?</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12a. Screen commercially fabricated of material nonreactive to subsurface conditions?</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12b. If filter pack installed, extends from bottom of screen to at least 3 ft above screen.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12c. Well has been developed.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12d. Annulus grouted with bentonite or bentonite/cement mixture.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>13. Does water sample meet established acceptance criteria? Sample is less than 5 NTU and sand free.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>14. Data Sources Used:</p> <p>Logs:</p> <p>Driller's: <u>Hatch / Swain</u> Date: <u>12/21/60</u> Company: <u>Hatch</u></p> <p>Geologist: <u>N/A</u> Date: _____ Company: _____</p> <p>Geophysical: <u>N/A</u> Date: _____ Company: _____</p> <p>Television: <u>N/A</u> Date: _____ Company: _____</p> <p>Publications: Title, Author, Date</p> <p><u>HANFORD WELLS, M. A. Chamness and J. K. Merz, August 1993</u></p> <p>Databases:</p> <p><u>WHC Well Services</u></p> <p>Field Check: <u>WHC Well Services</u> Date: <u>11/11/95</u> Company: <u>WHC</u></p> <p>Other:</p> <p>_____</p> <p>_____</p>			
<p>15. Comments: Identify evaluation criteria addressed by number:</p> <p><u>Well lacks, proper seals, surface protection, Proper identification.</u></p> <p><u>Items: 5, 5c, 6,8,7c.</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>			
<p>16. Status</p> <p>Well is acceptable for intended use <input type="checkbox"/> <u>No</u> <input type="checkbox"/> <u>Well lacks seals</u></p> <p>Well is acceptable for intended use if variance is granted <input type="checkbox"/> <u>NA</u> <input type="checkbox"/> <u>Not applicable</u></p> <p>Rehabilitation required to continue intended use <input type="checkbox"/> <u>No</u> <input type="checkbox"/> <u>Not applicable</u></p> <p>Remediation required to achieve intended use <input type="checkbox"/> <u>No</u> <input type="checkbox"/> <u>Well has no identified user</u></p> <p>Decommission, well is unneeded or cannot be remediated <input type="checkbox"/> <u>Yes</u> <input type="checkbox"/> <u>Well has no identified need</u></p> <p>Other _____ <input type="checkbox"/> _____</p>			
<p>17. Status Recommendation</p> <p>Done By: Name: <u>T. J. Wood</u> Title: <u>Senior Engineer</u> Date: <u>02/22/96</u></p>			

WHC-SD-EN-AP-161, Rev. 0, Appendix H

DIAGRAMMATIC WELL DECOMMISSIONING PROCESS		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>19Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>21Dec60</u>	WELL NUMBER: <u>299-W15-100 A7399</u> TEMPORARY WELL NO: <u>#11</u> Hanford Coordinates: N/S <u>N 42,377</u> E/W <u>W 75.910</u> State Coordinates: N <u>136,378.08</u> E <u>566,756.05</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
DIAGRAMMATIC DECOMMISSIONING ACTIVITIES (Depths from ground surface)	<p>The diagram shows a vertical well casing and a riser pipe. The casing is labeled with 'f' and has a depth of 70 ft. The riser pipe is labeled with 'f' and has an I.D. of 2-in. The diagram includes various annotations such as 'Elevation of reference point: [672.00-ft] (top of casing)', 'Height of reference point above [2.5-ft] ground surface', 'Depth of surface seal [ND]', 'Type of surface seal: None documented', 'I.D. of surface casing (If present) [ND]', 'I.D. of riser pipe: [2-in]', 'Type of riser pipe: Carbon steel', 'Diameter of borehole: [7-in nom]', 'Elevation/depth top of seal Type of seal: Not documented', 'Assumed natural fill as 6-in casing was pulled', 'No perforations documented:', 'Depth bottom of casing', and 'Depth bottom of borehole: [70-ft]'.</p>	
[1] Establish depth to bottom, clean out [2] Perforate 2-in casing from 70-ft back to 1-ft [3] Place cement grout from 70-ft back to 1-ft [4] Cut casing at 1-ft., place marker and fill to grade		
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
NOTE: Order of work to be determined by field conditions.		
Drawing By: <u>TJW/2W15-100.PLN</u> Date: <u>23Apr96</u> Reference: <u>Hanford Wells</u>		

WHC-SD-EN-AP-161, Rev. 0, Appendix H

WELL CONSTRUCTION AND COMPLETION SUMMARY		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>19Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>21Dec60</u>	WELL NUMBER: <u>299-W15-100 A7399</u> TEMPORARY WELL NO: <u>#11</u> Hanford Coordinates: N/S <u>N 42,377</u> E/W <u>W 75,910</u> State Coordinates: N <u>136,378.08</u> E <u>566,756.05</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
GENERALIZED STRATIGRAPHY 0-18: 50% SAND, 50% GRAVEL 18-45: SAND, LARGE GRAVEL, COBBLE 45-70: SAND & GRAVEL DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		Elevation of reference point: <u>[672.00-ft]</u> (top of casing) Height of reference point above <u>[2.5-ft]</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing <u>[ND]</u> (If present) I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: <u>[70-ft]</u>
Drawing By: <u>TJW/2W15-100.ASB</u> Date: <u>21Feb96</u> Reference: <u>Hanford Wells</u>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID B-2759	2. Well Name 299-W15-759
Page 1 of 2		
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u>) No potential user identified</p> <p>4. Is well presently in use? <input type="checkbox"/> <u>No</u>) No use identified</p> <p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u>) No documentation of annular seal</p> <p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u>) Well terminates within upper sediment</p> <p>5b. Aquifer/strata penetrated permanently sealed? <input type="checkbox"/> <u>No</u>) No seals documented</p> <p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u>) No surface seal documented</p> <p>5d. Casing overlap more than 8 ft; packed and grouted? <input type="checkbox"/> <u>N/A</u>) Not applicable</p> <p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u>) Well is open at top</p> <p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u>) No annular seal documented</p> <p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u>) Not applicable</p> <p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u>) Drilled before applicable date of WAC 173-303</p> <p>7c. Well properly identified? <input type="checkbox"/> <u>No</u>) No permanent identification</p> <p>8. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u>) No surface seal documented</p> <p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u>) No cap, or other protection</p> <p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u>) Inside secured fenced tank farm</p> <p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u>) Not applicable</p> <p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u>) Not applicable</p> <p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u>) Not documented</p> <p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u>) Not documented</p> <p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u>) Not documented</p> <p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u>) Not applicable</p>		
RCRA/CERCLA MONITORING WELL?		
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u>) Not applicable</p> <p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u>) Not applicable</p> <p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u>) Drillers discription only</p>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID B-2759	2. Well Name 299-W15-754																		
Page 2 of 2																				
<p>12. Is design and construction IAW WAC 173-160-5407</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12a. Screen commercially fabricated of material nonreactive to subsurface conditions?</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12b. If filter pack installed, extends from bottom of screen to at least 3 ft above screen.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12c. Well has been developed.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>12d. Annulus grouted with bentonite or bentonite/cement mixture.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>13. Does water sample meet established acceptance criteria? Sample is less than 5 NTU and sand free.</p> <p><input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>14. Data Sources Used:</p> <p>Logs:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%;">Driller's: <u>Hatch / Swain</u></td> <td style="width: 25%;">Date: <u>12/00/60</u></td> <td style="width: 25%;">Company: <u>Hatch</u></td> </tr> <tr> <td>Geologist: <u>N/A</u></td> <td>Date: _____</td> <td>Company: _____</td> </tr> <tr> <td>Geophysical: <u>N/A</u></td> <td>Date: _____</td> <td>Company: _____</td> </tr> <tr> <td>Television: <u>N/A</u></td> <td>Date: _____</td> <td>Company: _____</td> </tr> </table> <p>Publications: Title, Author, Date</p> <p><u>HANFORD WELLS, M. A. Chamness and J. K. Merz, August 1993</u></p> <p>Databases:</p> <p><u>WHC Well Services</u></p> <p>Field Check: <u>WHC Well Services</u> Date: <u>11/11/95</u> Company: <u>WHC</u></p> <p>Other: _____</p>			Driller's: <u>Hatch / Swain</u>	Date: <u>12/00/60</u>	Company: <u>Hatch</u>	Geologist: <u>N/A</u>	Date: _____	Company: _____	Geophysical: <u>N/A</u>	Date: _____	Company: _____	Television: <u>N/A</u>	Date: _____	Company: _____						
Driller's: <u>Hatch / Swain</u>	Date: <u>12/00/60</u>	Company: <u>Hatch</u>																		
Geologist: <u>N/A</u>	Date: _____	Company: _____																		
Geophysical: <u>N/A</u>	Date: _____	Company: _____																		
Television: <u>N/A</u>	Date: _____	Company: _____																		
<p>15. Comments: Identify evaluation criteria addressed by number:</p> <p><u>Well lacks, proper seals, surface protection, Proper identification.</u></p> <p><u>Items: 5, 5c, 6,8,7c.</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>																				
<p>16. Status</p> <table style="width:100%; border: none;"> <tr> <td style="width: 45%;">Well is acceptable for intended use</td> <td style="width: 10%;"><input type="checkbox"/> <u>No</u></td> <td style="width: 45%;">Well lacks seals</td> </tr> <tr> <td>Well is acceptable for intended use if variance is granted</td> <td><input type="checkbox"/> <u>NA</u></td> <td>Not applicable</td> </tr> <tr> <td>Rehabilitation required to continue intended use</td> <td><input type="checkbox"/> <u>No</u></td> <td>Not applicable</td> </tr> <tr> <td>Remediation required to achieve intended use</td> <td><input type="checkbox"/> <u>No</u></td> <td>Well has no identified user</td> </tr> <tr> <td>Decommission, well is unneeded or cannot be remediated</td> <td><input type="checkbox"/> <u>Yes</u></td> <td>Well has no identified need</td> </tr> <tr> <td>Other _____</td> <td><input type="checkbox"/> _____</td> <td>_____</td> </tr> </table>			Well is acceptable for intended use	<input type="checkbox"/> <u>No</u>	Well lacks seals	Well is acceptable for intended use if variance is granted	<input type="checkbox"/> <u>NA</u>	Not applicable	Rehabilitation required to continue intended use	<input type="checkbox"/> <u>No</u>	Not applicable	Remediation required to achieve intended use	<input type="checkbox"/> <u>No</u>	Well has no identified user	Decommission, well is unneeded or cannot be remediated	<input type="checkbox"/> <u>Yes</u>	Well has no identified need	Other _____	<input type="checkbox"/> _____	_____
Well is acceptable for intended use	<input type="checkbox"/> <u>No</u>	Well lacks seals																		
Well is acceptable for intended use if variance is granted	<input type="checkbox"/> <u>NA</u>	Not applicable																		
Rehabilitation required to continue intended use	<input type="checkbox"/> <u>No</u>	Not applicable																		
Remediation required to achieve intended use	<input type="checkbox"/> <u>No</u>	Well has no identified user																		
Decommission, well is unneeded or cannot be remediated	<input type="checkbox"/> <u>Yes</u>	Well has no identified need																		
Other _____	<input type="checkbox"/> _____	_____																		
<p>17. Status Recommendation</p> <p>Done By: Name: <u>T. J. Wood</u> Title: <u>Senior Engineer</u> Date: <u>02/22/96</u></p>																				

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DIAGRAMMATIC WELL DECOMMISSIONING PROCESS		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Company: <u>Hatch Drilling Co</u> Date Started: <u>Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>Dec60</u>	WELL NUMBER: <u>299-W15-759 B2759</u> TEMPORARY WELL NO: <u>#3</u> Hanford Coordinates: N/S <u>N 42,352</u> E/W <u>W 75,941</u> State Coordinates: N <u>136,368.55</u> E <u>566,753.29</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
DIAGRAMMATIC DECOMMISSIONING ACTIVITIES (Depths from ground surface)		
[1] Establish depth to bottom, clean out [2] Perforate 2-in casing from 70-ft back to 1-ft [3] Place cement grout from 70-ft back to 1-ft [4] Cut casing at 1-ft. place marker and fill to grade	<p>The diagram shows a vertical well casing and a riser pipe. The casing is labeled with 'f' and has a depth of 70-ft. The riser pipe is labeled with 'f' and has an I.D. of 2-in. The diagram includes various annotations such as 'Elevation of reference point: [672.00-ft] (top of casing)', 'Height of reference point above [2.5-ft] ground surface', 'Depth of surface seal [ND]', 'Type of surface seal: None documented', 'I.D. of surface casing (if present) [ND]', 'I.D. of riser pipe: [2-in]', 'Type of riser pipe: Carbon steel', 'Diameter of borehole: [7-in nom]', 'Elevation/depth top of seal', 'Type of seal: Not documented', 'Assumed natural fill as 6-in casing was pulled', 'No perforations documented:', 'Depth bottom of casing', and 'Depth bottom of borehole: [70-ft]'.</p>	Elevation of reference point: <u>[672.00-ft]</u> (top of casing) Height of reference point above <u>[2.5-ft]</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing (if present) <u>[ND]</u> I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: <u>[70-ft]</u>
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
NOTE: Order of work to be determined by field conditions.		
Drawing By: <u>TJW/2W15-759.PLN</u> Date: <u>23Apr96</u> Reference: <u>Hanford Wells</u>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID B-2760	2. Well Name 299-W15-760
Page 1 of 2		
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u>) <u>No potential user identified</u></p>		
<p>4. Is well presently in use? <input type="checkbox"/> <u>No</u>) <u>No use identified</u></p>		
<p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u>) <u>No documentation of annular seal</u></p>		
<p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u>) <u>Well terminates within upper sediment</u></p>		
<p>5b. Aquifer/strata penetrated permanently sealed? <input type="checkbox"/> <u>No</u>) <u>No seals documented</u></p>		
<p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>		
<p>5d. Casing overlap more than 8 ft; packed and grouted? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u>) <u>Well is open at top</u></p>		
<p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u>) <u>No annular seal documented</u></p>		
<p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u>) <u>Drilled before applicable date of WAC 173-303</u></p>		
<p>7c. Well properly identified? <input type="checkbox"/> <u>No</u>) <u>No permanent identification</u></p>		
<p>B. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u>) <u>No surface seal documented</u></p>		
<p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u>) <u>No cap, or other protection</u></p>		
<p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u>) <u>Inside secured fenced tank farm</u></p>		
<p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u>) <u>Not documented</u></p>		
<p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>RCRA/CERCLA MONITORING WELL?</p>		
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u>) <u>Not applicable</u></p>		
<p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u>) <u>Drillers discription only</u></p>		

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**RESOURCE PROTECTION GROUNDWATER WELL
STRUCTURE FITNESS FOR USE CHECKLIST**

1. Well ID: B-2760 2. Well Name: 299-W15-760

Page 2 of 2

12. Is design and construction IAW WAC 173-160-5407

N/A Not applicable

12a. Screen commercially fabricated of material nonreactive to subsurface conditions?

N/A Not applicable

12b. If filter pack installed, extends from bottom of screen to at least 3 ft above screen.

N/A Not applicable

12c. Well has been developed.

N/A Not applicable

12d. Annulus grouted with bentonite or bentonite/cement mixture.

N/A Not applicable

13. Does water sample meet established acceptance criteria?

Sample is less than 5 NTU and sand free.

N/A Not applicable

14. Data Sources Used:

Logs:

Driller's: <u>Hatch / Swain</u>	Date: <u>12/00/60</u>	Company: <u>Hatch</u>
Geologist: <u>N/A</u>	Date: _____	Company: _____
Geophysical: <u>N/A</u>	Date: _____	Company: _____
Television: <u>N/A</u>	Date: _____	Company: _____

Publications: Title, Author, Date

HANFORD WELLS, M. A. Chamness and J. K. Merz, August 1993

Databases:

WHC Well Services

Field Check: WHC Well Services Date: 11/11/95 Company: WHC

Other:

15. Comments: Identify evaluation criteria addressed by number:

Well lacks, proper seals, surface protection, Proper identification.
Items: 5, 5c, 6,8,7c.

16. Status

Well is acceptable for intended use	<input type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/> Well lacks seals
Well is acceptable for intended use if variance is granted	<input type="checkbox"/> <u>NA</u> <input checked="" type="checkbox"/> Not applicable
Rehabilitation required to continue intended use	<input type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/> Not applicable
Remediation required to achieve intended use	<input type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/> Well has no identified user
Decommission, well is unneeded or cannot be remediated	<input type="checkbox"/> <u>Yes</u> <input checked="" type="checkbox"/> Well has no identified need
Other _____	<input type="checkbox"/> _____

17. Status Recommendation

Done By: Name: T. J. Wood Title: Senior Engineer Date: 02/22/96

WHC-SD-EN-AP-161, Rev. 0, Appendix H

WELL CONSTRUCTION AND COMPLETION SUMMARY		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Drilling Company: <u>Hatch Drilling Co</u> Date Started: <u>Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Company Location: <u>Pasco, WA</u> Date Complete: <u>Dec60</u>	WELL NUMBER: <u>299-W15-760 B2760</u> TEMPORARY WELL NO: <u>#6</u> Hanford Coordinates: N/S <u>N 42,360.3</u> E/W <u>W 75,926.6</u> State Coordinates: N <u>136,375.55</u> E <u>566,738.29</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
GENERALIZED STRATIGRAPHY	Driller's Log	
0~18: 50% SAND, 50% GRAVEL 18~45: SAND, LARGE GRAVEL, COBBLE 45~70: SAND & GRAVEL		Elevation of reference point: <u>[672.00-ft]</u> (top of casing) Height of reference point above <u>[2.5-ft]</u> ground surface Depth of surface seal <u>[ND]</u> Type of surface seal: <u>None documented</u> I.D. of surface casing (If present) <u>[ND]</u> I.D. of riser pipe: <u>[2-in]</u> Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: <u>[7-in nom]</u> Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: <u>[70-ft]</u>
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
Drawing By: <u>TJW/2W15-760.ASB</u> Date: <u>22Feb96</u> Reference: <u>Hanford Wells</u>		

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RESOURCE PROTECTION GROUNDWATER WELL STRUCTURE FITNESS FOR USE CHECKLIST	1. Well ID B-2761	2. Well Name 299-W15-761
Page 1 of 2		
<p>3. Has a need for use of the well been identified and documented? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No potential user identified</p> <p>4. Is well presently in use? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No use identified</p> <p>5. Is casing sealed in accordance with IAW WAC 173-160-075? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No documentation of annular seal</p> <p>5a. Natural barriers preserved? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Well terminates within upper sediment</p> <p>5b. Aquifer/strata penetrated permanently sealed? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No seals documented</p> <p>5c. Annulus sealed against surface water? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No surface seal documented</p> <p>5d. Casing overlap more than 8 ft; packed and grouted? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>6. If not in use, is well capped IAW WAC 173-160-085? <input type="checkbox"/> <u>NO</u> <input type="checkbox"/> Well is open at top</p> <p>7. Is design and construction IAW WAC 173-160-500? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No annular seal documented</p> <p>7a. Saturated formation/aquifers not connected? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>7b. Cuttings/development water handled IAW WAC 173-303? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Drilled before applicable date of WAC 173-303</p> <p>7c. Well properly identified? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No permanent identification</p> <p>8. Is surface protection IAW WAC 173-160-510? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> No surface seal documented</p> <p>8a. Well capped and protected? <input type="checkbox"/> <u>NO</u> <input type="checkbox"/> No cap, or other protection</p> <p>8b. Protective posts, surface pad or cover installed? <input type="checkbox"/> <u>No</u> <input type="checkbox"/> Inside secured fenced tank farm</p> <p>8c. Surface protection waived or variance obtained? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>8d. Is existing surface protection damaged? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>9. Are casing materials IAW 173-160-520? <input type="checkbox"/> <u>ND</u> <input type="checkbox"/> Not documented</p> <p>10. Was drill rig/drilling equipment cleaned IAW WAC 173-160-530? <input type="checkbox"/> <u>ND</u> <input type="checkbox"/> Not documented</p> <p>10a. Drill rig/equipment casing/screen cleaned? <input type="checkbox"/> <u>ND</u> <input type="checkbox"/> Not documented</p> <p>10b. Filter pack cleaned? Material compatible? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p>		
RCRA/CERCLA MONITORING WELL?		
<p>11. Does water sample from vertical screened interval represent horizontal stratigraphy? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>11a. Screened interval documented? <input type="checkbox"/> <u>N/A</u> <input type="checkbox"/> Not applicable</p> <p>11b. Vertical lithology documented? <input type="checkbox"/> <u>ND</u> <input type="checkbox"/> Drillers discription only</p>		

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**RESOURCE PROTECTION GROUNDWATER WELL
STRUCTURE FITNESS FOR USE CHECKLIST**

1. Well ID: B-2761 2. Well Name: 299-W15-76A

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12. Is design and construction IAW WAC 173-160-540?

N/A Not applicable

12a. Screen commercially fabricated of material nonreactive to subsurface conditions?

N/A Not applicable

12b. If filter pack installed, extends from bottom of screen to at least 3 ft above screen.

N/A Not applicable

12c. Well has been developed.

N/A Not applicable

12d. Annulus grouted with bentonite or bentonite/cement mixture.

N/A Not applicable

13. Does water sample meet established acceptance criteria?
Sample is less than 5 NTU and sand free.

N/A Not applicable

14. Data Sources Used:

Logs:

Driller's: Hatch / Swain Date: 12/00/60 Company: Hatch

Geologist: N/A Date: _____ Company: _____

Geophysical: N/A Date: _____ Company: _____

Television: N/A Date: _____ Company: _____

Publications: Title, Author, Date

HANFORD WELLS, M. A. Chamness and J. K. Merz, August 1993

Databases:

WHC Well Services

Field Check: WHC Well Services Date: 11/11/95 Company: WHC

Other:

15. Comments: Identify evaluation criteria addressed by number:

Well lacks, proper seals, surface protection, Proper identification.

Items: 5, 5c, 6,8,7c.

16. Status

Well is acceptable for intended use No Well lacks seals

Well is acceptable for intended use if variance is granted NA Not applicable

Rehabilitation required to continue intended use No Not applicable

Remediation required to achieve intended use No Well has no identified user

Decommission, well is unneeded or cannot be remediated Yes Well has no identified need

Other: _____ _____

17. Status Recommendation

Done By: Name: T. J. Wood Title: Senior Engineer Date: 02/22/96

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DIAGRAMMATIC WELL DECOMMISSIONING PROCESS		
Drilling Method: <u>Cable tool</u> Fluid Used: <u>Not documented</u> Driller's Name: <u>Hatch / Swain</u> Company: <u>Hatch Drilling Co</u> Date Started: <u>Dec60</u>	Sample Method: <u>Drive barrel</u> Additives Used: <u>Not documented</u> WA State Lic Nr: <u>Not documented</u> Location: <u>Pasco, WA</u> Date Complete: <u>Dec60</u>	WELL NUMBER: <u>299-W15-761 B2761</u> TEMPORARY WELL NO: <u>#10</u> Hanford Coordinates: N/S <u>N 42,371.8</u> E/W <u>W 75,911.4</u> State Coordinates: N <u>136,406.55</u> E <u>566,722.29</u> Start Card #: <u>Not documented</u> T <u> </u> R <u> </u> S <u> </u> Elevation Ground surface (ft): <u>Not documented</u>
Depth to water: <u>Not applicable</u>		
DIAGRAMMATIC DECOMMISSIONING ACTIVITIES (Depths from ground surface)		
[1] Establish depth to bottom, clean out [2] Perforate 2-in casing from 70-ft back to 1-ft [3] Place cement grout from 70-ft back to 1-ft [4] Cut casing at 1-ft. place marker and fill to grade	Elevation of reference point: [672.00-ft] (top of casing) Height of reference point above [2.5-ft] ground surface Depth of surface seal [ND] Type of surface seal: <u>None documented</u> I.D. of surface casing (If present) [ND] I.D. of riser pipe: [2-in] Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: [7-in nom] Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: [70-ft]	
DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		
NOTE: Order of work to be determined by field conditions.		
Drawing By: <u>TJW/2W15-761.PLN</u> Date: <u>23Apr96</u> Reference: <u>Hanford Wells</u>		

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WELL CONSTRUCTION AND COMPLETION SUMMARY		
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Depth to water: <u>Not applicable</u>		
GENERALIZED STRATIGRAPHY 0-18: 50% SAND, 50% GRAVEL 18-45: SAND, LARGE GRAVEL, COBBLE 45-70: SAND & GRAVEL DRILLER'S NOTES: Drilled and set 6-in casing to 70-ft. Placed 2-in sch.40 to 70-ft and backpulled 6-in. casing		Elevation of reference point: [672.00-ft] (top of casing) Height of reference point above [2.5-ft] ground surface Depth of surface seal [ND] Type of surface seal: <u>None documented</u> I.D. of surface casing (If present) [ND] I.D. of riser pipe: [2-in] Type of riser pipe: <u>Carbon steel</u> Diameter of borehole: [7-in nom] Elevation/depth top of seal Type of seal: <u>Not documented</u> Assumed natural fill as 6-in casing was pulled No perforations documented: Depth bottom of casing Depth bottom of borehole: [70-ft]
Drawing By: <u>TJW/2W15-761.ASB</u> Date: <u>22Feb96</u> Reference: <u>Hanford Wells</u>		

DISTRIBUTION SHEET

To Distribution	From T. J. Wood	Page 1 of 1
		Date April 29, 1996
Project Title/Work Order A Supplemental revision by ECN to "Fitness-For-Intended-Use Evaluation Recommendations for Hanford Site Wells, WHC-SD-EN-AP-161, Rev 0."		EDT No. NA
		ECN No. 611438

Name	MSIN	Text With All Attach.	Text Only	Attach./ Appendix Only	EDT/ECN Only
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M. G. Gardner	S3-24	X			
D. G. Horton	H6-06	X			
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