

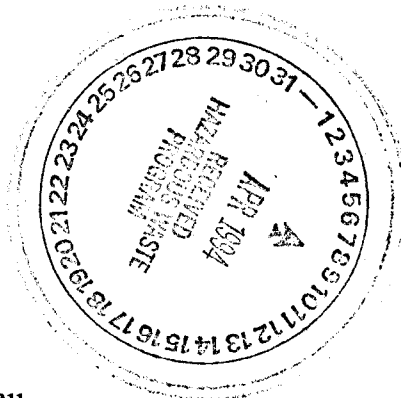


DEPARTMENT OF THE AIR FORCE

HEADQUARTERS 27th FIGHTER WING (ACC)  
CANNON AIR FORCE BASE, NEW MEXICO

*entered*  
C A F B  
6 APR 1994

William M. Guth, Brig Gen, USAF  
Commander  
100 S DL Ingram Blvd Suite 100  
Cannon AFB NM 88103-5214



Ms. Anna Walker  
New Mexico Environment Department  
Hazardous and Radioactive Materials Bureau  
525 Camino De Los Marquez  
Santa Fe NM 87502

Dear Ms. Walker

Attached is the 1992/1993 Biennial Hazardous Waste Report for Cannon Air Force Base. Questions concerning this report may be directed to Ms. Vera Wood at (505) 784-4639.  
784-4820

Sincerely

*Mike Guth*  
WILLIAM M. GUTH  
Brigadier General, USAF  
Commander

Attachment:  
EPA FM 8700-13A/B

cc:  
HQ ACC/CEV w/o Atch  
AFRCE-CR w/o Atch



## DEPARTMENT OF THE AIR FORCE

HEADQUARTERS 49TH FIGHTER WING (ACC)  
HOLLOMAN AIR FORCE BASE, NEW MEXICO


17 MAR 1994

MEMORANDUM FOR New Mexico Environment Department  
Hazardous & Radioactive Materials Bureau  
Attn: Ms Anna Walker  
525 Camino de los Marquez  
P.O. Box 26110  
Santa Fe, NM 87502

FROM: 49 CES/CEV  
550 Tabosa Ave  
Holloman AFB, NM 89330-9458

SUBJECT: 1993 Biennial Report

1. Attached please find the 1993 Biennial Hazardous Waste Report.
2. If you have any questions regarding this matter, contact Mr Billy Claxton at 475-3931.

  
HOWARD E. MOFFITT  
Deputy Base Civil Engineer

Attachment:  
Biennial Report

*received  
entered  
8/9/94*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: 27 FW/CC  
Canon AFB, NM 88103-5214  
EPA ID NO: NM17151712111214141514



U.S. ENVIRONMENTAL PROTECTION AGENCY

1993 Hazardous Waste Report

FORM IC

IDENTIFICATION AND CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 9 of the 1993 Hazardous Waste Report booklet before completing this form.

Sec. I Site name and location address. Complete A through H. Check the box  in items A, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instruction page 10.

A. EPA ID No. Same as label <input checked="" type="checkbox"/> or →		B. County Curry	
C. Site/company name Same as label <input checked="" type="checkbox"/> or →		D. Has the site name associated with this EPA ID changed since 1991 <input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No	
E. Street name and number. If not applicable, enter industrial park, building name, or other physical location description. Same as label <input type="checkbox"/> or → 100 S DL Ingram Blvd Suite 100			
F. City, town, village, etc. Same as label <input checked="" type="checkbox"/> or →		G. State Same as label	H. Zip Code Same as label

Sec. II Mailing address of site. Instruction page 10.

A. Is the mailing address the same as the location address? <input checked="" type="checkbox"/> 1 Yes (SKIP TO SEC. III) <input type="checkbox"/> 2 No (GO TO BOX B)		
B. Number and street name of mailing address		
C. City, town, village, etc.	D. State	E. Zip Code

Sec. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instruction page 10.

A. Please print: Last Name First name M.I. Oshita Bruce G.	B. Title Chief, Environmental Flight	C. Telephone 1510151718141-2171319 Extension
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Sec. IV "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations."

A. Please print: Last Name First name M.I. Guth William M.	B. Title Commander, 27th Fighter Wing
C. Signature <i>Mike Guth</i>	D. Date of signature 07 06 94 MO. DAY YR.

*AW entipa*  
6/9/94

**Sec.V - Generator Status**  
EPA ID NO. NM17 572 124 454

<p><b>A. 1993 RCRA generator status</b> Instruction page 10. (CHECK ONE BOX BELOW)</p> <p><input checked="" type="checkbox"/> 1 LQG  <input type="checkbox"/> 2 SQG  <input type="checkbox"/> 3 CESQG  <input type="checkbox"/> 4 Non generator (Continue to Box B)</p> <p>SKIP TO SEC. VI</p>	<p><b>B. Reason for not generating</b> Page 12. (CHECK ALL THAT APPLY)</p> <p><input type="checkbox"/> 1 Never generated  <input type="checkbox"/> 2 Out of business  <input type="checkbox"/> 3 Only excluded or delisted waste  <input type="checkbox"/> 4 Only non-hazardous waste  <input type="checkbox"/> 5 Periodic or occasional generator  <input type="checkbox"/> 6 Waste minimization activity  <input checked="" type="checkbox"/> 7 Other (SPECIFY COMMENTS IN BOX BELOW)</p>
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**Sec.VI - On-Site Waste Management Status** *Obtained info. from Vepa Wood 6/9/94 AW*

<p><b>A. Storage subject to RCRA permitting requirements</b> Page 13. <input checked="" type="checkbox"/></p>	<p><b>B. Treatment, disposal, or recycling subject to RCRA permitting requirements</b> Page 13. <input checked="" type="checkbox"/></p>	<p><b>C. RCRA-exempt treatment, disposal, or recycling</b> Page 13. <input checked="" type="checkbox"/></p>
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**Sec.VII - Waste Minimization Activity during 1992 or 1993**

<p><b>A. Did this site begin or expand a source reduction activity</b> during 1992 or 1993? Page 14.</p> <p><input checked="" type="checkbox"/> 1 Yes  <input type="checkbox"/> 2 No</p>	<p><b>B. Did this site begin or expand a recycling activity</b> during 1992 or 1993? Page 15.</p> <p><input checked="" type="checkbox"/> 1 Yes  <input type="checkbox"/> 2 No</p>	<p><b>C. Did this site systematically investigate opportunities for source reduction or recycling</b> during 1992 or 1993? Page 15.</p> <p><input checked="" type="checkbox"/> 1 Yes  <input type="checkbox"/> 2 No</p>
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**D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional source reduction activities** in 1992 or 1993? Page 15  
(CHECK YES OR NO FOR EACH ITEM)

Yes	No	
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	a. Insufficient capital to install new source reduction equipment or implement new source reduction practices
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	b. Lack of technical information on source reduction techniques applicable to the specific production processes
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	c. Source reduction is not economically feasible: cost savings in waste management or production will not recover the capital investment
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	d. Concern that product quality may decline as a result of source reduction
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	e. Technical limitations of the production processes
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	f. Permitting burdens
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	g. Source reduction previously implemented - additional reduction does not appear to be technically feasible
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	h. Source reduction previously implemented - additional reduction does not appear to be economically feasible
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	i. Source reduction previously implemented - additional reduction does not appear to be feasible due to permitting requirements
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	j. Other (SPECIFY COMMENTS IN BOX BELOW)

**E. Did any of the factors listed below delay or limit the site's ability to initiate new or additional on-site or off-site recycling activities** during 1992 or 1993? Page 15.  
(CHECK YES OR NO FOR EACH ITEM)

Yes	No		Yes	No	
<input checked="" type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	a. Insufficient capital to install new recycling equipment or implement new recycling practice	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	g. Technical limitations of production processes inhibit shipments off-site for recycling
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	b. Lack of technical information on recycling techniques applicable to this site's specific production process	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	h. Technical limitations of production processes inhibit on-site recycling
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	c. Recycling is not economically feasible: cost savings in waste management will not recover the capital investment	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	i. Permitting burdens inhibit recycling
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	d. Concern that product quality may decline as a result of recycling	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	j. Lack of permitted off-site recycling facilities
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	e. Requirements to manifest wastes inhibit shipments of off-site for recycling	<input checked="" type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	k. Unable to identify a market for recycled materials
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	f. Financial liability provisions inhibit shipments off-site for recycling	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	l. Recycling previously implemented - additional recycling does not appear to be technically feasible
			<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	m. Recycling previously implemented - additional recycling does not appear to be economically feasible
			<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	n. Recycling previously implemented - additional recycling does not appear to be feasible due to permitting requirements
			<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	o. Other (SPECIFY COMMENTS IN BOX BELOW)

**Comments:** 0. Cannon received equipment that cannot be used until the electrical equipment on base is upgraded (e.g., part cleaners requiring 240 volt outlets, base maximum is 208v)