



Department of Energy
 Albuquerque Operations Office
 Los Alamos Area Office
 Los Alamos, New Mexico 87544

SEP 20 1996



CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Benito Garcia, Bureau Chief
 Hazardous and Radioactive Materials Bureau
 New Mexico Environment Department
 2044 Galisteo St., Bldg. A
 P. O. Box 26110
 Santa Fe, New Mexico 87505

Dear Mr. Garcia:

Subject: Notice of Completion of Off-Site Waste Shipments, Activity 3.1.2C and 3.1.5F in the Site Treatment Plan (STP)

The purpose of this letter is to notify NMED of completion of required activities set forth in the FFCO, October 4, 1995 (as revised). Activity 3.1.2 C and 3.1.5F on pages 8 and 11 of the Compliance Plan Volume (CPV, Exhibit A) of the STP (as revised June, 1996) require that, "*(W)ithin 45 days of receipt of waste at treatment facility,*" DOE and the University "*(P)rovide documentation to NMED that waste was received at off-site facility.*" The Laboratory was required to complete shipment of all wastes in Sections 3.1.2 and 3.1.5 of the CPV by September 30, 1997 and August 25, 2000, respectively.

A shipment of STP covered wastes listed in Sections 3.1.2 and 3.1.5 of the CPV was completed on August 8, 1996. Wastes were sent to the Envirocare facility near Clive, Utah. These included wastes in treatability groups 7 and 4, respectively, in the table below. In addition, the shipment included STP covered wastes listed in treatability group 5, in Section 3.4.3 of the Background Volume, but not addressed in the CPV. Wastes shipped are listed in the table below.

Treat. Group	MWIR ID	Waste descr.	No. items	No. drums	Weight (lbs)	Vol. (cu.m.)	
3.1.5	4	LA-W921	Activated/ Inseparable Lead	48	46	33,600	9.37
3.4.3 3/K6 Vol.	5	LA-W931	Lead Requiring Sorting	27	27	24,000	5.67
3.1.2	7	LA-W904	Lead Blankets	4	4	2,000	0.74

Documentation is enclosed. Also enclosed is a Certification Statement. These documents were prepared in accordance with the requirements of Section XX, "Documents, Information, and Reporting Requirements," of the FFCO.



1796

Recd LANK FFCO/96

2

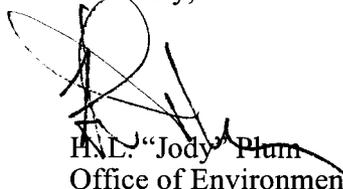
SEP 20 1996

Benito Garcia

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The Laboratory's records and documents related to this letter are available to NMED's staff upon request. Please contact me at (505) 665-5042 if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Jody Plum". The signature is written over a circular stamp or mark.

H.L. "Jody" Plum
Office of Environment and Projects

LAAMEP:2JP-043

Enclosures

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. NM0890010515	Manifest Document No. 96449	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Los Alamos National Laboratory P.O. Box 1663, MS J593, Los Alamos, NM 87545			A. State Manifest Document Number		
4. Generator's Phone (505 667-7579)			B. State Generator's ID		
5. Transporter 1 Company Name TRI STATE MOTOR TRANSIT CO.		6. US EPA ID Number MOD095038998		C. State Transporter's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 800-742-1671	
9. Designated Facility Name and Site Address Envirocare of Utah, Inc. Tooele County, I-80, Exit 49, West of Salt Lake City Clive, UT 84029		10. US EPA ID Number UTD982598898		E. State Transporter's ID	
				F. Transporter's Phone	
				G. State Facility's ID	
				H. Facility's Phone 801-532-1330	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
		No.			
a. <input checked="" type="checkbox"/> HAZARDOUS WASTE, SOLID, N.O.S., 9, HA3077, III, (LEAD)		7	5083	p	D008
b. <input checked="" type="checkbox"/> HAZARDOUS WASTE, SOLID, N.O.S., 9, HA3077, III, (LEAD)		4	2811	p	D008
c. <input checked="" type="checkbox"/> HAZARDOUS WASTE, SOLID, N.O.S., 9, HA3077, III, (LEAD)		22	18261	p	D008
d. <input type="checkbox"/>					
J. Additional Descriptions for Materials Listed Above 11a. GROUP 3 11b. GROUP 4 91004220 91004221 91004449 C9404184 11c. GROUP 5			K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information *EMERGENCY PHONE NO: (505) 667-6211* 11a. ERGNO: 171 11b. ERGNO: 171 11c. ERGNO: 171 *Radioactive volume contaminated lead below 2 nanocuries per gram.* EMTP#: 15624					
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, packed, marked, and labeled, 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 Don Oakley		Signature <i>Don Oakley</i>		Month Day Year 11/06/96	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Tony Gil		Signature <i>Tony Gil</i>	
				Month Day Year 01/06/96	
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 DAVID GILSON		Signature <i>David Gilson</i>		Month Day Year 08/08/96	



ORIGINAL-RETURN TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of 1

Information in the shaded area is not required by Federal law.

NM0890010515 96448

3. Generator's Name and Mailing Address

Los Alamos National Laboratory
P.O. Box 1663, MS J593, Los Alamos, NM 87545

4. Generator's Phone (505) 667-7579

5. Transporter 1 Company Name

TRI STATE MOTOR TRANSIT CO.

6. US EPA ID Number

MOD095038998

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

Envirocare of Utah, Inc.
Tooele County, I-80, Exit 49, West of Salt Lake City
Clive, UT 84029

10. US EPA ID Number

UTD982598898

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone 800-742-1671

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

801-532-1330

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

	No.	Type			
a. HAZARDOUS WASTE, SOLID, N.O.S., 9, WA3077, III, (LEAD)	25	DR	16940	p	D008
b. HAZARDOUS WASTE, SOLID, N.O.S., 9, WA3077, III, (LEAD)	2	DR	2314	p	D008
c. HAZARDOUS WASTE, SOLID, N.O.S., 9, WA3077, III, (LEAD)	13	DR	9602	p	D008
d.					

J. Additional Descriptions for Materials Listed Above

11a. GROUP 1
11b. GROUP 2 899376 899378
11c. GROUP 5

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211

11a. ERGNO: 171 11b. ERGNO: 171 11c. ERGNO: 171

Radioactive volume contaminated lead below 2 nanocuries per gram.

HMPP: 15625

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Printed/Typed Name

DAV OAKLEY

Signature

DAV OAKLEY

Month Day Year

08 06 96

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Benedikt Brosch

Signature

Benedikt Brosch

Month Day Year

08 06 96

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

MACE DAVIS

Signature

MACE DAVIS

Month Day Year

10 08 96



UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of 1

Information in the shaded area is not required by Federal law.

NM0890010515

86501

3. Generator's Name and Mailing Address

Los Alamos National Laboratory
P.O. Box 1663, MS J593, Los Alamos, NM 87545

4. Generator's Phone (505) 667-7579

A. State Manifest Document Number

B. State Generator's ID

5. Transporter 1 Company Name

PRI STATE MOTOR TRANSIT CO.

6. US EPA ID Number

MOD095038998

C. State Transporter's ID

D. Transporter's Phone 800-742-1671

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

Envirocare of Utah, Inc.
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Clive, UT 84029

10. US EPA ID Number

UTD982598898

G. State Facility's ID

H. Facility's Phone

801-532-1330

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers

13. Total Quantity

14. Unit Wt/Vol

15. Waste No.

	HM	No.	Type			
a.	X	1	DR	169	P	0000
b.	X	3	DR	1873	P	0000
c.						
d.						

13. Additional Descriptions for Materials Listed Above

11B 6101-01 LEAD BLANKETS 31002228
11B 6101-01 LEAD BLANKETS 31006215, 31006217, 31006218

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

EMERGENCY PHONE NO: (505) 667-6211
11a. ERGNO: 161 11b. ERGNO: 171

HMFD: 15440

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, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name: DAN OAKLEY Signature: [Signature] Month Day Year: 10/10/96

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Tody Gil Signature: [Signature] Month Day Year: 10/10/96

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: MACE DAVIS Signature: [Signature] Month Day Year: 10/10/96

GENERATOR

TRANSPORTER

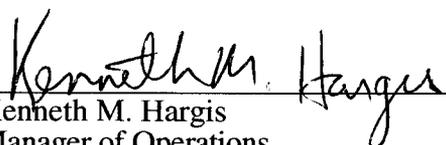
FACILITY



ORIGINAL-RETURN TO GENERATOR

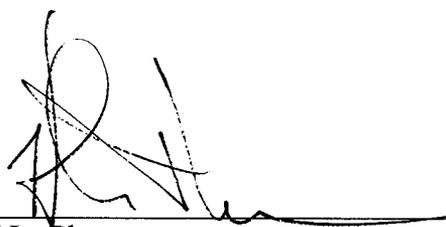
CERTIFICATION

I certify that I am the project manager responsible for overseeing the implementation of the Site Treatment Plan for the Los Alamos National Laboratory. To the best of my knowledge and belief, the information in this document is true, accurate, and complete.



Kenneth M. Hargis
Manager of Operations
Waste Management Program
Environmental Management Programs
Los Alamos National Laboratory
Operator

9/18/96
Date Signed



H.L. Plum
Regulatory Permitting and Compliance Manager
Los Alamos Area Office
U.S. Department of Energy
Albuquerque Operations
Owner/Operator

9/20/96
Date Signed