FORM 807 ISM 1-60

L. A. S. L. JOB ORDER

COPY

TO: FABRICATING GROUP OR ENGINEERING [redacted] ENG-4 DATE: [redacted] 7/24/61 No. 141306

ITEM OR WORK REQUESTED: Fill in Disposal wells

LOCATION TA: Area "C" Waste Pit

DRAWING NO.

BLDG. AND ROOM NO.

NUMBER OF UNITS

REQUESTED BY: T. Hargenrater [redacted]

DATE NEEDED: 2 weeks

GROUP CHARGE: Eng-4

PHONE: 7-4656 [redacted]

URGENCY: X ☐ A ☒ B ☐

SPECIAL PROJECT NO.

THIS SPACE FOR SD PRODUCTION CONTROL

PLACED IN SHOP — DATE

ESTIMATED TIME — INSPECTION { YES ☐ NO ☐

ASSIGNED TO — START — COMP.

RECEIPT FOR MATERIAL { QUANTITY

REC'D BY — DATE

DESCRIPTION

PROPERTY NUMBERS ASSIGNED BY JOCO

~~Furnish necessary labor to place dirt in disposal wells located in Materials Waste Area "C". Approximately 25 holes require drill to ground level. Work to be performed under H-1 supervision. Call 7-4093 on 7-4682 prior to start of work to be done.~~

L. D. & R. Section - Labor Crew

SUBJECT: Fill and level off disposal wells.

PERFORM THE FOLLOWING WORK:

Furnish labor and equipment to fill and level off approximately 25, 2' diameter radioactive disposal wells to ground level with available dirt at Area "C" Waste Disposal Pit located at turn-off to TA-35, Ten Site.

Contact T. Hargenrater of ENG-4, 7-4656, prior to starting this job.

Send copy of this order to Robert Overlin, ENG-4.

REQUESTING GROUP COMPLETE THIS SPACE

IF THIS IS A SUPPLEMENTAL JOB ORDER INDICATE:

ORIGINAL JO NBR.

REQUESTING GROUP

SIGNED BY

REQUESTOR'S ESTIMATE OF COST: $100.00

WILL INSTALLATION BE REQUIRED THRU ENGR.? YES / NO

A. DOES THIS APPEAR TO BE CAPITAL EQUIPMENT YES / NO

B. WILL THIS ITEM BECOME A PART OF EQUIPMENT NOT YET RECEIVED? IF "YES" COMPLETE "B1." YES / NO

B1. ITEM NOT YET REC'D BEING PROCURED ON JO OR PR

C. WILL THIS ITEM BECOME PART OF EXISTING EQUIPMENT? IF "YES" COMPLETE "C1." YES / NO

C1. PROPERTY NUMBER OF AND NAME OF EXISTING EQUIPMENT

SIGNATURE OF RTG. GROUP

DELEGATED PERSON — GROUP LEADER — DIVISION LEADER

FABRICATOR

RE CAPITAL EQUIPMENT:

REQUESTING GROUP

INDIVIDUAL

NOTIFIED OF FABRICATOR ESTIMATE BY:

DATE

	FABRICATOR ESTIMATE	HOURS	MATERIAL	LABOR AND OVERHEAD	TOTAL
	CAPITAL				
	EXPENSE				
	ACTUAL COST CAPITAL				
	EXPENSE				

REQUEST

DIRECTOR'S OFFICE APPROVAL

MEMO DATED

FROM:

TO:

SUB:

JOB ORDER COORDINATING OFFICE

Check with John Enders of H-1 for monitoring procedures and access to Disposal Area.

SIGNATURE RECEIVING GROUP

ACCOUNT DEBIT

5022