



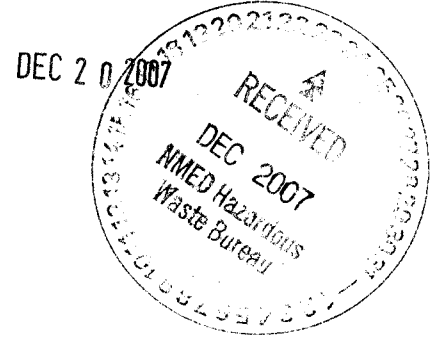
DEPARTMENT OF THE AIR FORCE
27TH SPECIAL OPERATIONS WING (AFSOC)
CANNON AIR FORCE BASE NEW MEXICO



COPY

Colonel Timothy J. Leahy
Commander
100 S DL Ingram Blvd Suite 100, Bldg 1
Cannon AFB NM 88103-5214

Mr. James Bearzi
Chief Hazardous Waste Bureau
New Mexico Environment Department
2905 Rodeo Park Drive East Building 1
Santa Fe NM 87505-6303



Dear Mr. Bearzi

Cannon Air Force Base hereby submits the attached Revised Part A Permit application and attachments to initiate the Part B Melrose Air Force Range (MAFR) Corrective Action Only Permit. This submission is in response to your letter regarding the deferment for the submittal of the revised Resource Conservation and Recovery Act Facility Investigation Work Plan for MAFR, dated 19 Jun 07.

Should you or your staff have any questions regarding this permit application, please contact Ms. Kristi L. Doll at (575) 784-1091 or Mr. Ronald A. Lancaster at (575) 784-1146.

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 gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed 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 for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Sincerely


TIMOTHY J. LEAHY, Colonel, USAF

Attachments:

1. Part A Application (EPA Form 8700-23)
2. Part B Narratives

cc:

NMED HWB (D. Cobrain)
NMED HWB (C. Frischkorn)
US EPA Region VI (B. Sturdivant)
HQ AFSOC/A7AV (J. Steele)
27 SOW/JA
27 SOW/SEG

<p>SEND COMPLETED FORM TO: The Appropriate State or EPA Regional Office.</p>	<p>United States Environmental Protection Agency</p> <p>RCRA SUBTITLE C SITE IDENTIFICATION FORM</p>		
<p>1. Reason for Submittal (See instructions on page 14.)</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p>Reason for Submittal:</p> <p><input type="checkbox"/> To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)</p> <p><input type="checkbox"/> To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application</p> <p><input checked="" type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # <u>2</u>)</p> <p><input type="checkbox"/> As a component of the Hazardous Waste Report</p>		
<p>2. Site EPA ID Number (page 15)</p>	<p>EPA ID Number</p> <p style="text-align: center;"> N M 5 1 5 7 2 1 1 2 4 4 5 6 </p>		
<p>3. Site Name (page 15)</p>	<p>Name: MELROSE AIR FORCE RANGE/CANNON AIR FORCE BASE</p>		
<p>4. Site Location Information (page 15)</p>	<p>Street Address: 506 N DL INGRAM BLVD</p>		
	<p>City, Town, or Village: CANNON AFB</p>	<p>State: NEW MEXICO</p>	
	<p>County Name: CURRY</p>	<p>Zip Code: 88103-5003</p>	
<p>5. Site Land Type (page 15)</p>	<p>Site Land Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		
<p>6. North American Industry Classification System (NAICS) Code(s) for the Site (page 15)</p>	<p>A.</p> <p style="text-align: center;"> </p>	<p>B.</p> <p style="text-align: center;"> </p>	
	<p>C.</p> <p style="text-align: center;"> </p>	<p>D.</p> <p style="text-align: center;"> </p>	
<p>7. Site Mailing Address (page 16)</p>	<p>Street or P. O. Box: 506 N DL INGRAM BLVD</p>		
	<p>City, Town, or Village: CANNON AFB</p>		
	<p>State: NEW MEXICO</p>		
	<p>Country: UNITED STATES</p>	<p>Zip Code: 88103-5003</p>	
<p>8. Site Contact Person (page 16)</p>	<p>First Name: TIMOTHY</p>	<p>MI: J</p>	<p>Last Name: LEAHY</p>
	<p>Phone Number: (575) 784-2727 Extension:</p>		<p>Email address: timothy.leahy@cannon.af.mil</p>
<p>9. Operator and Legal Owner of the Site (pages 16 and 17)</p>	<p>A. Name of Site's Operator: Commander, 27th Special Operations Wing</p>		<p>Date Became Operator (mm/dd/yyyy): 10/01/2007</p>
	<p>Operator Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		
	<p>B. Name of Site's Legal Owner: USAF 27th Special Operations Wing</p>		<p>Date Became Owner (mm/dd/yyyy): 10/01/2007</p>
	<p>Owner Type: <input type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>		

9. Legal Owner (Continued) Address	Street or P. O. Box: 100 N DL INGRAM BLVD, SUITE 100	
	City, Town, or Village: CANNON AFB	
	State: NM	
	Country: UNITED STATES	Zip Code: 88103-5214

10. Type of Regulated Waste Activity
Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 18 to 21.)

A. Hazardous Waste Activities
Complete all parts for 1 through 6.

- | | |
|---|---|
| <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1. Generator of Hazardous Waste
If "Yes", choose only one of the following - a, b, or c.</p> <p><input type="checkbox"/> a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or</p> <p><input type="checkbox"/> b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or</p> <p><input type="checkbox"/> c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste</p> <p>In addition, indicate other generator activities.</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> d. United States Importer of Hazardous Waste</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> e. Mixed Waste (hazardous and radioactive) Generator</p> | <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2. Transporter of Hazardous Waste</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4. Recycler of Hazardous Waste (at your site)</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 5. Exempt Boiler and/or Industrial Furnace
If "Yes", mark each that applies.</p> <p><input type="checkbox"/> a. Small Quantity On-site Burner Exemption</p> <p><input type="checkbox"/> b. Smelting, Melting, and Refining Furnace Exemption</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 6. Underground Injection Control</p> |
|---|---|

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. If "Yes", mark all boxes that apply:

	<u>Generate</u>	<u>Accumulate</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

2. Destination Facility for Universal Waste
Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

1. Used Oil Transporter
If "Yes", mark each that applies.
- a. Transporter
- b. Transfer Facility
2. Used Oil Processor and/or Re-refiner
If "Yes", mark each that applies.
- a. Processor
- b. Re-refiner
3. Off-Specification Used Oil Burner
4. Used Oil Fuel Marketer
If "Yes", mark each that applies.
- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

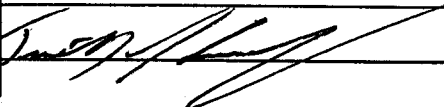
11. Description of Hazardous Wastes (See instructions on page 22.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 22.)

13. Certification. 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 for submitting false information, including the possibility of fine and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all operator(s) and owner(s) must sign (see 40 CFR 270.10 (b) and 270.11). (See instructions on page 22.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	TIMOTHY J. LEAHY, Commander 27th Special Operations Wing	12/19/2007

United States Environmental Protection Agency
HAZARDOUS WASTE PERMIT INFORMATION FORM

1. Facility Permit Contact (See instructions on page 23)	First Name: KRISTI	MI: L	Last Name: DOLL						
	Phone Number: (575) 784-1091		Phone Number Extension:						
2. Facility Permit Contact Mailing Address (See instructions on page 23)	Street or P.O. Box: 506 N DL INGRAM BLVD								
	City, Town, or Village: CANNON AFB								
	State: NEW MEXICO								
	Country: UNITED STATES	Zip Code: 88103-5003							
3. Operator Mailing Address and Telephone Number (See instructions on page 23)	Street or P.O. Box: 506 N DL INGRAM BLVD								
	City, Town, or Village: CANNON AFB								
	State: NEW MEXICO								
	Country: UNITED STATES	Zip Code: 88103-5003	Phone Number (575) 784-2008						
4. Legal Owner Mailing Address and Telephone Number (See instructions on page 23)	Street or P.O. Box: 100 X DL INGRAM BLVD, STE 100								
	City, Town, or Village: CANNON AFB								
	State: NEW MEXICO								
	Country: UNITED STATES	Zip Code: 88103-5214	Phone Number						
5. Facility Existence Date (See instructions on page 24)	Facility Existence Date (mm/dd/yyyy): 01/01/1967								
6. Other Environmental Permits (See instructions on page 24)									
A. Permit Type (Enter code)	B. Permit Number							C. Description	
AIR	1	5	1	7	-	M	-	1	Clean Air Act: Synthetic Minor Permit
NPDES	N	M	R	0	5	A	0	1 2	NPDES Multi-sector Storm Water Permit
7. Nature of Business (Provide a brief description; see instructions on page 24)									
The mission of the wing include infiltration, exfiltration and re-supply of special operations forces; air refueling of special operations rotary wing and tiltrotor aircraft; and precision fire support. These capabilities support a variety of special operations missions including direct action, unconventional warfare, special reconnaissance, counter-terrorism, personnel recovery, psychological operations and information operations.									

8. Process Codes and Design Capacities (See instructions on page 24) - Enter information in the Sections on Form Page 3.

PROCESS CODE - Enter the code from the list of process codes in the table below that best describes each process to be used at the facility. Fifteen lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. For "other" processes (i.e., D99, S99, T04 and X99), enter the process information in Item 9 (including a description).

B. PROCESS DESIGN CAPACITY - For each code entered in Section A, enter the capacity of the process.

- 1. AMOUNT** - Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process.
- 2. UNIT OF MEASURE** - For each amount entered in Section B(1), enter the code in Section B(2) from the list of unit of measure codes below that describes the unit of measure used. Select only from the units of measure in this list.

C. PROCESS TOTAL NUMBER OF UNITS - Enter the total number of units for each corresponding process code.

PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
	<u>Disposal:</u>			<u>Treatment (continued):</u>	
D79	Underground Injection Well Disposal	Gallons; Liters; Gallons Per Day; or Liters Per Day	T81	Cement Kiln	For T81-T93:
D80	Landfill	Acre-feet; Hectare-meter; Acres; Cubic Meters; Hectares; Cubic Yards	T82	Lime Kiln	
D81	Land Treatment	Acres or Hectares	T83	Aggregate Kiln	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Liters Per Hour; Kilograms Per Hour; or Million Btu Per Hour
D82	Ocean Disposal	Gallons Per Day or Liters Per Day	T84	Phosphate Kila	
D83	Surface Impoundment Disposal	Gallons; Liters; Cubic Meters; or Cubic Yards	T85	Coke Oven	
D99	Other Disposal	Any Unit of Measure in Code Table Below	T86	Blast Furnace	
	<u>Storage:</u>		T87	Smelting, Melting, or Refining Furnace	
S01	Container	Gallons; Liters; Cubic Meters; or Cubic Yards	T88	Titanium Dioxide Chloride Oxidation Reactor	
S02	Tank Storage	Gallons; Liters; Cubic Meters; or Cubic Yards	T89	Methane Reforming Furnace	
S03	Waste Pile	Cubic Yards or Cubic Meters	T90	Pulping Liquor Recovery Furnace	
S04	Surface Impoundment Storage	Gallons; Liters; Cubic Meters; or Cubic Yards	T91	Combustion Device Used In The Recovery Of Sulfur Values From Spent Sulfuric Acid	
S05	Drip Pad	Gallons; Liters; Acres; Cubic Meters; Hectares; or Cubic Yards	T92	Halogen Acid Furnaces	
S06	Containment Building Storage	Cubic Yards or Cubic Meters	T93	Other Industrial Furnaces Listed In 40 CFR §260.10	
S99	Other Storage	Any Unit of Measure in Code Table Below	T94	Containment Building - Treatment	Cubic Yards; Cubic Meters; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Btu Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million Btu Per Hour
	<u>Treatment:</u>			<u>Miscellaneous (Subpart X):</u>	
T01	Tank Treatment	Gallons Per Day; Liters Per Day	X01	Open Burning/Open Detonation	Any Unit of Measure in Code Table Below
T02	Surface Impoundment Treatment	Gallons Per Day; Liters Per Day	X02	Mechanical Processing	Short Tons Per Hour; Metric Tons Per Hour; Short Tons Per Day; Metric Tons Per Day; Pounds Per Hour; Kilograms Per Hour; Gallons Per Hour; Liters Per Hour; or Gallons Per Day
T03	Incinerator	Short Tons Per Hour; Metric Tons Per Hour; Gallons Per Hour; Liters Per Hour; Btu Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million Btu Per Hour	X03	Thermal Unit	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; or Million Btu Per Hour
T04	Other Treatment	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Gallons Per Day; Liters Per Hour; or Million Btu Per Hour	X04	Geologic Repository	Cubic Yards; Cubic Meters; Acre-feet; Hectare-meter; Gallons; or Liters
T80	Boiler	Gallons; Liters; Gallons Per Hour; Liters Per Hour; Btu Per Hour; or Million Btu Per Hour	X99	Other Subpart X	Any Unit of Measure Listed Below

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
Gallons.....	G	Short Tons Per Hour.....	D	Cubic Yards.....	Y
Gallons Per Hour.....	E	Metric Tons Per Hour.....	W	Cubic Meters.....	C
Gallons Per Day.....	U	Short Tons Per Day.....	N	Acres.....	B
Liters.....	L	Metric Tons Per Day.....	S	Acre-feet.....	A
Liters Per Hour.....	H	Pounds Per Hour.....	J	Hectares.....	Q
Liters Per Day.....	V	Kilograms Per Hour.....	R	Hectare-meter.....	F
		Million Btu Per Hour.....	X	Btu Per Hour.....	I

8. Process Codes and Design Capacities (Continued)

EXAMPLE FOR COMPLETING Item 8 (shown in line number X-1 below): A facility has a storage tank, which can hold 533.788 gallons.

Line Number	A. Process Code (From list above)			B. PROCESS DESIGN CAPACITY		(2) Unit of Measure (Enter code)	C. Process Total Number of Units	For Official Use Only
				(1) Amount (Specify)				
X 1	S	0	2	5	3 3 . 7 8 8	G	0 0 1	
1								
2								
3								
4								
5								
6								
7								
8								
9								
1 0								
1 1								
1 2								
1 3								
1 4								
1 5								

NOTE: If you need to list more than 15 process codes, attach an additional sheet(s) with the information in the same format as above. Number the lines sequentially, taking into account any lines that will be used for "other" processes (i.e., D99, S99, T04 and X99) in Item 9.

9. Other Processes (See instructions on page 25 and follow instructions from Item 8 for D99, S99, T04 and X99 process codes)

Line Number (Enter # in sequence with Item 8)	A. Process Code (From list above)			B. PROCESS DESIGN CAPACITY		C. Process Total Number of Units	D. Description of Process
				(1) Amount (Specify)	(2) Unit of Measure (Enter code)		
X 2	T	0	4	1 0 0 . 0 0 0	U	0 0 1	In-situ Vitrification

10. Description of Hazardous Wastes (See instructions on page 25) - Enter Information in the Sections on Form Page 5.

- A. EPA HAZARDOUS WASTE NUMBER** - Enter the four-digit number from 40 CFR, Part 261 Subpart D of each listed hazardous waste you will handle. For hazardous wastes which are not listed in 40 CFR, Part 261 Subpart D, enter the four-digit number(s) from 40 CFR Part 261, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY** - For each listed waste entered in Section A, estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in Section A, estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE** - For each quantity entered in Section B, enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure, taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in Section A, select the code(s) from the list of process codes contained in Items 8A and 9A on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the listed hazardous wastes.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in Section A, select the code(s) from the list of process codes contained in Items 8A and 9A on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

NOTE: THREE SPACES ARE PROVIDED FOR ENTERING PROCESS CODES. IF MORE ARE NEEDED:

1. Enter the first two as described above.
2. Enter "000" in the extreme right box of Item 10.D(1).
3. Use additional sheet, enter line number from previous sheet, and enter additional code(s) in Item 10.E.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in Item 10.D(2) or in Item 10.E(2).

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in Section A. On the same line complete Sections B, C and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In Section A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In Section D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING Item 10 (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operations. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

Line Number	A. EPA Hazardous Waste No. (Enter code)				B. Estimated Annual Quantity of Waste	C. Unit of Measure (Enter code)	D. PROCESSES													
	(1) PROCESS CODES (Enter code)						(2) PROCESS DESCRIPTION- (If a code is not entered in D(1))													
X 1	K	0	5	4	900	P	T	0	3	D	8	0								
X 2	D	0	0	2	400	P	T	0	3	D	8	0								
X 3	D	0	0	1	100	P	T	0	3	D	8	0								
X 4	D	0	0	2																Included With Above

10. Description of Hazardous Wastes (Continued. Use the Additional Sheet(s) as necessary; number pages as 5 a, etc.)													
Line Number	A. EPA Hazardous Waste No. (Enter code)	B. Estimated Annual Quantity of Waste	C. Unit of Measure (Enter code)	D. PROCESSES									
				(1) PROCESS CODES (Enter code)									
1													
2													
3													
4													
5													
6													
7													
8													
9													
1 0													
1 1													
1 2													
1 3													
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DEPARTMENT OF THE AIR FORCE
27TH CIVIL ENGINEER SQUADRON (ACC)
CANNON AIR FORCE BASE NEW MEXICO



Mr. Ronald A. Lancaster
Chief, Environmental Flight
506 N DL Ingram Blvd
Cannon AFB NM 88103-5323

MAY 09 2007

Ms. Cheryl Frischkorn
HWB-RCRA Permits Management Program
2905 Rodeo Park Drive East, Building 1
Santa Fe, New Mexico 87505

Dear Ms. Frischkorn

Enclosed for your review is the map of the impact area for Melrose Air Force Range (MAFR). The map will show that the entire 68,000 acres is being used for an impact area. Cannon Air Force Base (CAFB) requests an indefinite deferral of the Work Plan prepared for MAFR since it is an active range and would be considered obsolete.

CAFB will maintain and monitor all areas of Solid Waste Management Units and Areas of Concern at the range in accordance with the NMED Hazardous Waste Permit. If you have any questions regarding this request, please do not hesitate to contact the Restoration Program Manager, Ms. Kristi Doll at 505-784-1098 or email Kristi.doll@cannon.af.mil.

Sincerely

A handwritten signature in black ink, appearing to read "Ronald A. Lancaster", with a large, sweeping flourish at the end.

RONALD A. LANCASTER
Chief, Environmental Flight

Attachment:
MAFR Map