

**SPARTON**

**SPARTON TECHNOLOGY**

CERTIFIED MAIL-RETURN RECEIPT REQUESTED

March 19, 1996

Ms. Anna Walker  
New Mexico Environment Department  
P.O. Box 26110  
2044 Galisteo Dr.  
Santa Fe, New Mexico 87505

Dear Ms Walker:

Thank you for granting Sparton Technology, Inc. an extension to submit our 1995 Biennial Hazardous Waste Report.

Enclosed are 3 attachments.

Attachment 1 contains one each Form GM and Form PS 1993 versions. This is an addendum to our March 24, 1994 submittal and reports the amount of ground water treated on site via airstripping. Due to an oversight on our part this was not reported in our 1993 Biennial Hazardous Waste Report.

Attachment 2 reports the status of Sparton Technology's two other facilities; Rio Rancho which is a Small Quantity Generator and Deming Electronics which is a Conditionally Exempt Small Quantity Generator.

**Attachment 3** reports hazardous waste activity associated with our **Coors Road Facility**. Forms IC, OI, GM and PS totaling 14 pages are included. Form OI reports all transporters and off site TSD facilities utilized in 1994 and 1995. Form GM page 6 of 14 reports the last on site Perma-Fix treatment process conducted on February 28, 1995 for this facility. Subsequent to that the Coors Road Facility is a Conditionally Exempt Small Quantity Generator.

If you have any questions please contact John Wakefield or me at (505) 892-5300. Thank you for your attention to this matter.

Sincerely,  
SPARTON TECHNOLOGY, INC.

*RD Mico*  
Richard D. Mico  
Vice President and General Manager

Attachments:

cc: Mr. Jan Appel  
Mr. John Wakefield

ST 9L

*See  
4/22/96  
complete  
sent*

**ATTACHMENT 3**

*File  
4/19/96  
SAC  
GALC*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC.  
Coors Road Facility

EPA ID NO: N1M1D1018131211121313121



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



IDENTIFICATION AND CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 9 of the 1995 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 Bernalillo	
C. Site/company name Same as label <input type="checkbox"/> or → SPARTON TECHNOLOGY, INC.		D. Has the site name associated with this EPA ID changed since 1993? <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 → 9621 Coors Road, NW			
F. City, town, village, etc. Same as label <input type="checkbox"/> or → Albuquerque		G. State Same as label <u>N1M</u>	H. Zip Code Same as label <u>87114</u>

Sec. II Mailing address of site. Instruction page 10. SPARTON TECHNOLOGY, INC.		
A. Is the mailing address the same as the location address? <input type="checkbox"/> 1 Yes (SKIP TO SEC. III) <input checked="" type="checkbox"/> 2 No (GO TO BOX B)		
B. Number and street name of mailing address 4901 Rockaway Blvd.		
C. City, town, village, etc. Rio Rancho	D. State <u>N1M</u>	E. Zip Code <u>87114-4469</u>

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. WAKEFIELD, John M.	B. Title Environmental Safety Engineer	C. Telephone <u>505 892 5300</u> Extension <u>258</u>

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. MICO Richard D.		B. Title Vice President and General Manager	
C. Signature <i>Richard D. Mico</i>		D. Date of signature <u>03 19 96</u> MO. DAY YR.	

4/19/96

**Sec.V - Generator Status.** Instruction pages 10, 12.

**A. 1995 RCRA generator status**

(CHECK ONE BOX BELOW)

- 1 LQG \* SKIP to SEC. VI
- 2 SQG
- 3 CESQG
- 4 Non generator (Continue to Box B)

**B. Reason for not generating**

(CHECK ALL THAT APPLY)

- 1 Never generated
- 2 Out of business
- 3 Only excluded or delisted waste
- 4 Only non-hazardous waste
- 5 Periodic or occasional generator
- 6 Waste minimization activity
- 7 Other (SPECIFY COMMENTS IN BOX BELOW)

**Sec.VI - On-Site Waste Management Status.** Instruction pages 13, 14.

**A. Storage subject to RCRA permitting requirements**

1

**B. Treatment, disposal, or recycling subject to RCRA permitting requirements**

1

**C. RCRA-exempt treatment, disposal, or recycling**

1

**Sec.VII - Waste Minimization Activity during 1994 or 1995.** Instruction pages 14, 15:

**A. Did this site begin or expand a source reduction activity during 1994 or 1995?**

- 1 Yes
- 2 No

**B. Did this site begin or expand a recycling activity during 1994 or 1995?**

- 1 Yes
- 2 No

**C. Did this site systematically investigate opportunities for source reduction or recycling during 1994 or 1995?**

- 1 Yes
- 2 No

**D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional source reduction activities in 1994 or 1995?**

(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 type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | b. Lack of technical information on source reduction techniques applicable to the specific production processes                          |
| <input type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | c. Source reduction is not economically feasible: cost savings in waste management or production will not recover the capital investment |
| <input type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | d. Concern that product quality may decline as a result of source reduction  |
| <input type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | e. Technical limitations of the production processes   |
| <input type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | f. Permitting burdens  |
| <input checked="" type="checkbox"/> 1 | <input 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 checked="" type="checkbox"/> 1 | <input 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 1994 or 1995?**

(CHECK YES OR NO FOR EACH ITEM)

- | Yes                        | No                                    |   | Yes                                   | No                                    |  |
|----------------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | a. Insufficient capital to install new recycling equipment or implement new recycling practice                      | <input type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | g. Technical limitations of production processes inhibit shipments off-site for recycling                                |
| <input type="checkbox"/> 1 | <input checked="" 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 type="checkbox"/> 1            | <input checked="" type="checkbox"/> 2 | i. Permitting burdens inhibit recycling  |
| <input type="checkbox"/> 1 | <input checked="" type="checkbox"/> 2 | d. Concern that product quality may decline as a result of recycling  | <input type="checkbox"/> 1            | <input checked="" 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 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: \* Sec. V,A. Generator status as of 3-25-95 conditionally exempt small quantity generator  
 Sec. VII D&E Most facility/haz waste generation activities have ceased.

*See*  
4/19/96  
LTC  
CMT/AC



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC  
Coors Road Facility

EPA ID NO: NM1D, 083, 212, 332,

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description - instruction page 18. **Dilute acid and alkaline metal bearing solutions from printed circuit board plating and surface preparation.**

B. EPA hazardous waste code Page 19. D, 0, 0, 2, D, 0, 0, 6,  
D, 0, 0, 7, D, 0, 0, 8, \_\_\_\_\_

C. State hazardous waste code Page 19. \_\_\_\_\_

D. SIC code Page 19. 3, 6, 9, 9,

E. Origin code 1, Page 19 System Type L, M,

F. Source code Page 20. 2, 0, 5,\*

G. Point of measurement Page 20. 1,

H. Form code Page 20. B, 1, 0, 5,\*

I. RCRA - radioactive mixed Page 20. 2,

Sec. II A. Quantity generated in 1994 Instruction Page 21. 1, 9, 7, 0, 3, . 0,

B. Quantity generated in 1995 Page 21. \_\_\_\_\_

C. UOM Page 21. 1, Density \_\_\_\_\_  
 1 lbs/gal  2 sg

D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1) \*  
 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type Page 22. M, 1, 1, 1, Quantity treated, disposed, or recycled on site in 1995 0, . 0,

ON-SITE PROCESS SYSTEM 2

On-site process system type Page 22. \_\_\_\_\_ Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

Sec. III A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  2 No (SKIP TO SEC IV) Instruction page 22.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>M,</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>M,</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____

Sec. IV A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  2 No (THIS FORM IS COMPLETE) \* Instruction page 24.

B. Activity Page 24. W, W, W, W,

C. Other effects Page 25.  1 Yes  2 No

D. Quantity recycled in 1995 due to new activities Page 25. \_\_\_\_\_

E. Activity/production index Page 25. \_\_\_\_\_

F. 1995 source reduction quantity Page 26. \_\_\_\_\_

Comments: Sec. I, F. A01, A02, A03, A22, A23, A27  
Sec. I, H. B119 Dilute acid and alkaline aqueous waste with Pb, Cd, Cr.  
Sec. II, D. Waste is treated on site by Perma-Fix of NM and rendered non-hazardous  
Sec. IV, A. This waste is no longer produced

*file*  
4/19/96  
*as/2*  
*AM/uc*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC.  
Coors Road Facility

EPA ID NO: N.M.D. 083 212 332



U.S. ENVIRONMENTAL PROTECTION AGENCY  
1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description - instruction page 18.  
**Cleanup water from decontaminating printed circuit board production area.**

B. EPA hazardous waste code Page 19. D 0 0 8

C. State hazardous waste code Page 19.

D. SIC code Page 19. 3 6 9 9

E. Origin code 2 Page 19  
System Type LM

F. Source code Page 20. A 9 2

G. Point of measurement Page 20. 3

H. Form code Page 20. B 1 1 9\*

I. RCRA - radioactive mixed Page 20. 2

Sec. II A. Quantity generated in 1994 Instruction Page 21. 0 0

B. Quantity generated in 1995 Page 21. 3 8 7 2 0

C. UOM Page 21. 1

Density 1 lbs/gal  2 sg

D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type Page 22. M 1 1 1

Quantity treated, disposed, or recycled on site in 1995 3 8 7 2 0

ON-SITE PROCESS SYSTEM 2

On-site process system type Page 22. M

Quantity treated, disposed, or recycled on site in 1995

Sec. III A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  
 2 No (SKIP TO SEC IV)  
Instruction page 22.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23.	C. System type shipped to Page 23.	D. Off-site availability code Page 23.	E. Total quantity shipped in 1995 Page 23.
Site 2	B. EPA ID No. of facility waste was shipped to Page 23.	C. System type shipped to Page 23.	D. Off-site availability code Page 23.	E. Total quantity shipped in 1995 Page 23.

Sec. IV A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  
 2 No (THIS FORM IS COMPLETE)\*  
Instruction page 24.

B. Activity Page 24. W W

C. Other effects Page 25.  1 Yes  2 No

D. Quantity recycled in 1995 due to new activities Page 25.

E. Activity/production index Page 25.

F. 1995 source reduction quantity Page 26.

Comments:  
Perma-Fix of NM treated this waste on site and rendered it non-hazardous.  
Sec. I, H. Form Code, Aqueous solution with cementitious particulates.  
Sec. IV, A. This was a one-time waste generation activity.

*file*  
4/19/96  
202  
CA/oe

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC  
Coors Road Facility

EPA ID NO: N.M.D., 0,8,3, 2,1,2, 3,3,2,



U.S. ENVIRONMENTAL PROTECTION AGENCY  
1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description - Instruction page 18.  
**Rhodium sulfate plating solution.**

B. EPA hazardous waste code Page 19.  
D, 0, 0, 2

C. State hazardous waste code Page 19.

D. SIC code Page 19. 3, 6, 9, 9

E. Origin code 1 Page 19  
System Type M

F. Source code Page 20. 2, 2, 2

G. Point of measurement Page 20. 1

H. Form code Page 20. B, 1, 0, 3

I. RCRA - radioactive mixed Page 20. 2

Sec. II A. Quantity generated in 1994 Instruction Page 21. 0, 0

B. Quantity generated in 1995 Page 21. 1, 4, 5, 0

C. UOM Page 21. 1

Density 1

D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type Page 22. M

Quantity treated, disposed, or recycled on site in 1995

ON-SITE PROCESS SYSTEM 2

On-site process system type Page 22. M

Quantity treated, disposed, or recycled on site in 1995

Sec. III A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  2 No (SKIP TO SEC IV) Instruction page 22.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. <u>C, A, T, 0, 0, 0, 6, 1, 2, 1, 5, 0</u>	C. System type shipped to Page 23. <u>M, 0, 1, 9</u>	D. Off-site availability code Page 23. <u>1</u>	E. Total quantity shipped in 1995 Page 23. <u>1, 4, 5, 0</u>
Site 2	B. EPA ID No. of facility waste was shipped to Page 23.	C. System type shipped to Page 23.	D. Off-site availability code Page 23.	E. Total quantity shipped in 1995 Page 23.

Sec. IV A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  2 No (THIS FORM IS COMPLETE) \* Instruction page 24.

B. Activity Page 24. W

C. Other effects Page 25.  1 Yes  2 No

D. Quantity recycled in 1995 due to new activities Page 25.

E. Activity/production index Page 25.

F. 1995 source reduction quantity Page 26.

Comments:  
Sec. IV, A. This waste is no longer generated.

*Handwritten:* JWC  
sent to  
DARC  
4/22/96

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC  
Coors Road Facility

EPA ID NO: N M D 0 8 3 2 1 2 3 3 2



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I	A. Waste description - instruction page 18. <b>Gold cyanide plating solution</b>					
B. EPA hazardous waste code Page 19. <u>D 0 0 3</u>			C. State hazardous waste code Page 19. _____			
D. SIC code Page 19. <u>3 6 9 9</u>	E. Origin code <u>1</u> Page 19 System _____ Type <u>M</u>	F. Source code Page 20. <u>A 2 2</u>	G. Point of measurement Page 20. <u>1</u>	H. Form code Page 20. <u>B 1 0 7</u>	I. RCRA - radioactive mixed Page 20. <u>2</u>	

Sec. II	A. Quantity generated in 1994 Instruction Page 21. <u>0 0</u>	B. Quantity generated in 1995 Page 21. <u>3 4 5 0</u>	C. UOM Page 21. <u>1</u>	Density _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg	D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21. <input type="checkbox"/> 1 Yes (CONTINUE TO SYSTEM 1) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1			ON-SITE PROCESS SYSTEM 2		
On-site process system type Page 22. <u>M</u>	Quantity treated, disposed, or recycled on site in 1995 _____		On-site process system type Page 22. <u>M</u>	Quantity treated, disposed, or recycled on site in 1995 _____	

Sec. III	A. Was any of this waste shipped off-site in 1995 <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input type="checkbox"/> 2 No (SKIP TO SEC IV) Instruction page 22.				
Site 1	B. EPA ID No. of facility waste was shipped to Page 23. <u>C A T 0 0 0 6 1 2 1 5 0</u>	C. System type shipped to Page 23. <u>M 0 1 9</u>	D. Off-site availability code Page 23. <u>1</u>	E. Total quantity shipped in 1995 Page 23. <u>3 4 5 0</u>	
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>M</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____	

Sec. IV	A. Did new activities in 1995 result in minimization of this waste? <input type="checkbox"/> 1 Yes (CONTINUE TO BOX B) * <input checked="" type="checkbox"/> 2 No (THIS FORM IS COMPLETE) Instruction page 24.				
B. Activity Page 24. <u>W</u> _____ <u>W</u> _____ <u>W</u> _____ <u>W</u> _____	C. Other effects Page 25. <input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No	D. Quantity recycled in 1995 due to new activities Page 25. _____	E. Activity/production index Page 25. _____	F. 1995 source reduction quantity Page 26. _____	

Comments: \* Sec. IV, A. This waste is no longer generated.



*file*  
*OK/AC*  
*ed 4*  
*4/22/96*



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC.  
Coors Road Facility

EPA ID NO: N, M, D, 0, 8, 3, 2, 1, 2, 3, 3, 2,



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description - instruction page 18. Waste flammable liquid containing Isopropanol and acetone with minor toluene, xylene, methyl ethylketone, trichloroethene used for cleaning electronic assemblies.

B. EPA hazardous waste code Page 19. D, 0, 0, 1, F, 0, 0, 2, D 0 4 0  
F, 0, 0, 3, F, 0, 0, 5, D, 0, 3, 5,

C. State hazardous waste code Page 19. \_\_\_\_\_

D. SIC code Page 19. 3, 6, 9, 9,

E. Origin code 1, Page 19 System Type M, \_\_\_\_\_

F. Source code Page 20. A, 0, 5,

G. Point of measurement Page 20. 2,

H. Form code Page 20. B, 2, 1, 9,

I. RCRA - radioactive mixed Page 20. 2,

Sec. II A. Quantity generated in 1994 Instruction Page 21. 2, 6, 3, 8, . 0,

B. Quantity generated in 1995 Page 21. 3, 6, 0, . 0,

C. UDM Page 21. 1, Density \_\_\_\_\_  
 1 lbs/gal  2 sg

D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type Page 22. M, \_\_\_\_\_ Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

ON-SITE PROCESS SYSTEM 2

On-site process system type Page 22. M, \_\_\_\_\_ Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

Sec. III A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  2 No (SKIP TO SEC IV) Instruction page 22.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. <u>T, N, D, 9, 9, 1, 2, 7, 9, 4, 8, 0,</u>	C. System type shipped to Page 23. <u>M, 0, 6, 1,</u>	D. Off-site availability code Page 23. <u>1,</u>	E. Total quantity shipped in 1995 Page 23. <u>3, 6, 0, . 0,</u>
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>M, _____</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____

Sec. IV A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  2 No (THIS FORM IS COMPLETE) Instruction page 24.

B. Activity Page 24. W, \_\_\_\_\_ W, \_\_\_\_\_  
W, \_\_\_\_\_ W, \_\_\_\_\_

C. Other effects Page 25.  1 Yes  2 No

D. Quantity recycled in 1995 due to new activities Page 25. \_\_\_\_\_

E. Activity/production index Page 25. \_\_\_\_\_

F. 1995 source reduction quantity Page 26. \_\_\_\_\_

Comments: Sec. I, H. Principally Isopropanol and acetone.

*du*  
4/22/96  
atloc  
su

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC  
Coors Road Facility

EPA ID NO: N.M.D., 0.8.3, 2.1.2, 3.3.2



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description - instruction page 18.  
**Hazardous waste solid, nickel-cadmium batteries**

B. EPA hazardous waste code Page 19. L.A.B.P. D.0.0.6

C. State hazardous waste code Page 19. \_\_\_\_\_

D. SIC code Page 19. 3, 6, 9, 9

E. Origin code 1 Page 19 System \_\_\_\_\_ Type LM \_\_\_\_\_

F. Source code Page 20. 1.5, 1.5

G. Point of measurement Page 20. 1

H. Form code Page 20. B, 0, 0, 3

I. RCRA - radioactive mixed Page 20. 2

Sec. II A. Quantity generated in 1994 Instruction Page 21. 6, 3, 5, 0

B. Quantity generated in 1995 Page 21. 0, 0

C. UOM Page 21. 1

Density \_\_\_\_\_  
 1 lbs/gal  2 cg

C. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type Page 22. LM

Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

ON-SITE PROCESS SYSTEM 2

On-site process system type Page 22. LM

Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

Sec. III A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  2 No (SKIP TO SEC IV) Instruction page 22.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>LM</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>LM</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____

Sec. IV A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  2 No (THIS FORM IS COMPLETE) \* Instruction page 24.

B. Activity Page 24. W W W W

C. Other effects Page 25.  1 Yes  2 No

D. Quantity recycled in 1995 due to new activities Page 25. \_\_\_\_\_

E. Activity/production index Page 25. \_\_\_\_\_

F. 1995 source reduction quantity Page 26. \_\_\_\_\_

Comments: \* Sec. III, A. In 1994, shipped 635.0 lbs. to ARF069748192, M019, Sec. III, D. = 1  
Sec. IV, A. This waste is no longer generated.

*del*  
*Palae*  
*en*  
*4/22/96*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC  
Coors Road Facility

EPA ID NO: (N.M.D.) 0183, 2112, 3332



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I

A. Waste description - instruction page 18. Labpack: Hazardous waste; flammable liquids, corrosive liquids, aerosols, solids, cyanide solutions, poisonous solids, flammable solids, poisonous liquids, etc.

B. EPA hazardous waste code Page 19. L A B P

C. State hazardous waste code Page 19.

D. SIC code Page 19. 3, 6, 9, 9

E. Origin code Page 19. System 1 Type LM

F. Source code Page 20. 9, 4

G. Point of measurement Page 20. 1

H. Form code Page 20. 0, 0, 1\*

I. RCRA - radioactive mixed Page 20. 2

Sec. II

A. Quantity generated in 1994 Instruction Page 21. 3, 4, 5, 1, 0

B. Quantity generated in 1995 Page 21. 0, 0

C. UOM Page 21. 1 Density \_\_\_\_\_  
 1 lbs/gal  2 sg

D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1

On-site process system type Page 22. LM

Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

ON-SITE PROCESS SYSTEM 2

On-site process system type Page 22. LM

Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

Sec. III

A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  2 No (SKIP TO SEC IV)\*  
Instruction page 22.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>LM</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>LM</u>	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____

Sec. IV

A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  2 No (THIS FORM IS COMPLETE)\*  
Instruction page 24.

B. Activity Page 24. _____	C. Other effects Page 25. <input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No	D. Quantity recycled in 1995 due to new activities Page 25. _____	E. Activity/production index Page 25. _____	F. 1995 source reduction quantity Page 26. _____
----------------------------	--	---	---	--

Comments: \* Sec. I, H. Form Code. One manifest containing B001 and B004. See GM Form pg.12 of 14  
\* Sec. III, A. In 1994 shipped 3451.0 lbs. to ARD069748192, M041 & M043, Sec. III, D. = 1  
\* Sec. IV, A. This waste is no longer generated.

*Handwritten notes:*  
 ARD 069748192  
 M043  
 11/27/95  
 erl

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC  
Coors Road Facility

EPA ID NO: N M D 0 8 3 2 1 2 3 3 2



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description - Instruction page 18. **Labpack; cyanide salts, potassium, silver, sodium and copper cyanide**

B. EPA hazardous waste code Page 19. L A B P P 0 2 9  
P 0 9 8 P 1 0 4 P 1 0 6

C. State hazardous waste code Page 19. \_\_\_\_\_

D. SIC code Page 19. 3 6 9 9 E. Origin code 1 Page 19 System Type LM \_\_\_\_\_ F. Source code Page 20. 5 9 G. Point of measurement Page 20. 1 H. Form code Page 20. B 0 0 4 I. RCRA - radioactive mixed Page 20. 2

Sec. II A. Quantity generated in 1994 Instruction Page 21. 2 7 0 B. Quantity generated in 1995 Page 21. 0 0 C. UOM Page 21. 1 Density \_\_\_\_\_  1 lbs/gal  2 sg D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  1 Yes (CONTINUE TO SYSTEM 1)  2 No (SKIP TO SEC. III)

ON-SITE PROCESS SYSTEM 1 On-site process system type Page 22. LM \_\_\_\_\_ Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

ON-SITE PROCESS SYSTEM 2 On-site process system type Page 22. LM \_\_\_\_\_ Quantity treated, disposed, or recycled on site in 1995 \_\_\_\_\_

Sec. III A. Was any of this waste shipped off-site in 1995  1 Yes (CONTINUE TO BOX B)  2 No (SKIP TO SEC IV) \*

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. LM _____	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. LM _____	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1995 Page 23. _____

Sec. IV A. Did new activities in 1995 result in minimization of this waste?  1 Yes (CONTINUE TO BOX B)  2 No (THIS FORM IS COMPLETE)\*

B. Activity Page 24. LW \_\_\_\_\_ LW \_\_\_\_\_ C. Other effects Page 25.  1 Yes  2 No D. Quantity recycled in 1995 due to new activities Page 25. \_\_\_\_\_ E. Activity/production index Page 25. \_\_\_\_\_ F. 1995 source reduction quantity Page 26. \_\_\_\_\_

Comments: \*Sec. I.H. Form Code: Also B313  
 \*Sec. III, A. In 1994 shipped 27.0 lbs. to ARD069748192, M043, Sec. III, D. = 1.  
 \*Sec. IV, A. This waste is no longer generated.

*AW 4/22/96*  
*ent 2A/pc*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: SPARTON TECHNOLOGY, INC.  
Coors Road Facility

EPA ID NO: N M D 0 8 3 2 1 2 3 3 2



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report



WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form.

<b>Sec. I</b>		<b>A. Waste description - Instruction page 18.</b>				
		Groundwater contaminated by a RCRA hazardous waste leachate				
<b>B. EPA hazardous waste code Page 19.</b>			<b>C. State hazardous waste code Page 19.</b>			
F 0 0 1 F 0 0 2 D 0 4 0 D 0 0 7						
<b>D. SIC code Page 19.</b>	<b>E. Origin code Page 19</b>	<b>F. Source code Page 20.</b>	<b>G. Point of measurement Page 20.</b>	<b>H. Form code Page 20.</b>	<b>I. RCRA - radioactive mixed Page 20.</b>	
3 6 9 9	2 * System Type L M	A 6 9	1	B 1 1 4 *	2	

<b>Sec. II</b>	<b>A. Quantity generated in 1994</b>	<b>B. Quantity generated in 1995</b>	<b>C. UOM</b>	<b>Density</b>	<b>D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.</b>
	Instruction Page 21.	Page 21.	Page 21.		
	NA *	NA *	5	1 0 0	<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO SYSTEM 1) <input type="checkbox"/> 2 No (SKIP TO SEC. III)
			1 lbs/gal	X sg	
<b>ON-SITE PROCESS SYSTEM 1</b>			<b>ON-SITE PROCESS SYSTEM 2</b>		
<b>On-site process system type Page 22.</b>	<b>Quantity treated, disposed, or recycled on site in 1995</b>		<b>On-site process system type Page 22.</b>	<b>Quantity treated, disposed, or recycled on site in 1995</b>	
M 0 8 3	3 9 9 7 2 0 0		M		

<b>Sec. III</b>	<b>A. Was any of this waste shipped off-site in 1995</b>				
	Instruction page 22. <input type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input checked="" type="checkbox"/> 2 No (SKIP TO SEC IV)				
<b>Site 1</b>	<b>B. EPA ID No. of facility waste was shipped to Page 23.</b>	<b>C. System type shipped to Page 23.</b>	<b>D. Off-site availability code Page 23.</b>	<b>E. Total quantity shipped in 1995 Page 23.</b>	
		M			
<b>Site 2</b>	<b>B. EPA ID No. of facility waste was shipped to Page 23.</b>	<b>C. System type shipped to Page 23.</b>	<b>D. Off-site availability code Page 23.</b>	<b>E. Total quantity shipped in 1995 Page 23.</b>	
		M			

<b>Sec. IV</b>	<b>A. Did new activities in 1995 result in minimization of this waste? Page 24.</b>				
	Instruction page 24. <input type="checkbox"/> 1 Yes (CONTINUE TO BOX B) <input checked="" type="checkbox"/> 2 No (THIS FORM IS COMPLETE)				
<b>B. Activity Page 24.</b>	<b>C. Other effects Page 25.</b>	<b>D. Quantity recycled in 1995 due to new activities Page 25.</b>	<b>E. Activity/production index Page 25.</b>	<b>F. 1995 source reduction quantity Page 26.</b>	
W W W W	<input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No				

Comments: Sec. 1, E Origin Code = other remedial cleanup activity interim measures.  
Sec. 1, H Form Code = contaminated groundwater  
Sec. II, A&B = NA as per instructions pg 46 of 1995 Haz Waste Rpt Instructions/Forms

*This pg. is O.K.*

*see 04/00  
4/22/96 unit*



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

WASTE TREATMENT, DISPOSAL, OR RECYCLING PROCESS SYSTEMS

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Sparton Technology, Inc.  
Coors Road Facility

EPA ID NO: NM, D, 0, 8, 3, 2, 1, 2, 3, 3, 2,

INSTRUCTIONS: Read the detailed instructions beginning on page 33 of the 1995 Hazardous Waste Report booklet before completing this form.

<b>Sec. I</b>	A. Waste treatment, disposal, or recycling system description instruction Page 38. <b>Airstripping of contaminated groundwater</b>			
B. System type Page 36.	C. Regulatory status Page 35.	D. Operational status Page 39.	E. Unit types Page 39.	
<u>M, 0, 8, 3</u>	<u>1, 0</u>	<u>0, 1</u>	<u>0, 1</u> <u>1, 0</u> *1	

<b>Sec. II</b>	A. 1995 influent quantity Instruction page 40.		B. Maximum operational capacity Page 41.	
Total <u>3, 9, 9, 7, 2, 0, 0</u> UOM <u>5</u> Density <u>1, 0, 0</u>		Total <u>6, 6, 6, 6, 0, 0, 0</u> *2		
RCRA <u>0, 1</u> <input type="checkbox"/> 1 lbs/gal <input checked="" type="checkbox"/> 2 sg		RCRA <u>2, 8, 4, 6</u>		
C. 1995 liquid effluent quantity Instruction page 42.		D. 1995 solid/sludge residual quantity Page 43.		
Total <u>3, 9, 9, 7, 2, 0, 0</u> UOM <u>5</u> Density <u>1, 0</u>		Total <u>0, 0</u> UOM <u></u> Density <u></u>		
RCRA <u>0, 0</u> 1 lbs/gal <input checked="" type="checkbox"/> 2 sg		RCRA <u>0, 0</u> <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 sg		
E. Limitation on maximum operational capacity Page 43.	F. Commercial capacity availability code Page 43.	G. Percent capacity commercially available Page 43.		
1. <u>0, 1</u> 2. <u>0, 7</u> 3. <u>0, 8</u> *	<u>NA</u>	<u></u> %		

Comments:

\*1. Sec. I, E. Unit types, other groundwater production well to double containment HDPE pipe to 550 gal. collection tank to airstripper to 15,000 gallon storage tank to facility process water to sewer system.

\*2. Sec. II, B. Historical maximum capacity achieved.  
Sec. II, E. Other limitations on capacity groundwater production from wells.

*HW ent 4/22/96*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Sparton Technology, Inc.  
Coors Road Facility

EPA ID NO: N M D 0 8 3 2 1 2 3 3 2



**FORM  
01**

**U.S. ENVIRONMENTAL  
PROTECTION AGENCY**

1995 Hazardous Waste Report

**OFF-SITE  
IDENTIFICATION**

INSTRUCTIONS: Read the detailed instructions on the reverse side before completing this form.

Site 1	A. EPA ID No. of off-site installation or transporter <u>0 1 K D 0 0 0 4 0 2 3 9 6</u>	B. Name of off-site installation or transporter Perma-Fix Treatment Services
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip _____

Site 2	A. EPA ID No. of off-site installation or transporter <u>C A D 9 8 0 8 8 7 4 7 5</u>	B. Name of off-site installation or transporter Security Environmental Services, Inc.
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip _____

Site 3	A. EPA ID No. of off-site installation or transporter <u>N M D 9 8 6 6 8 2 0 9 4</u>	B. Name of off-site installation or transporter Security Environmental Services
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip _____

Site 4	A. EPA ID No. of off-site installation or transporter <u>N M D 9 8 6 6 8 2 0 8 6</u>	B. Name of off-site installation or transporter Environmental Transportation
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip _____

Site 5	A. EPA ID No. of off-site installation or transporter <u>N M D 0 0 0 1 8 2 1 2 1</u>	B. Name of off-site installation or transporter Perma-Fix Treatment Services
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip _____

Comments:

*file 4/22/96*  
*ev't*

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Sparton Technology, Inc.  
Coors Road Facility

EPA ID NO: N M D 0 8 3 2 1 2 3 3 2



**U.S. ENVIRONMENTAL PROTECTION AGENCY**

1995 Hazardous Waste Report

**FORM 01**

**OFF-SITE IDENTIFICATION**

INSTRUCTIONS: Read the detailed instructions on the reverse side before completing this form.

Site 1	A. EPA ID No. of off-site installation or transporter <u>C A D 0 0 0 0 8 3 1 2 1</u>	B. Name of off-site installation or transporter <u>Laidlaw Environmental Services</u>
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip _____

Site 2	A. EPA ID No. of off-site installation or transporter <u>T N D 9 9 1 2 7 9 4 8 0</u>	B. Name of off-site installation or transporter <u>Perma-Fix of Memphis*</u>
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation Street <u>901 East Bodley</u> City <u>Memphis</u> State <u>T N</u> Zip <u>3 8 1 0 6</u>

Site 3	A. EPA ID No. of off-site installation or transporter <u>T N D 9 9 1 2 7 9 4 8 0</u>	B. Name of off-site installation or transporter <u>American Resources Recovery*</u>
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation Street <u>901 East Bodley</u> City <u>Memphis</u> State <u>T N</u> Zip <u>3 8 1 0 6</u>

Site 4	A. EPA ID No. of off-site installation or transporter <u>A R D 0 6 9 7 4 8 1 9 2</u>	B. Name of off-site installation or transporter <u>ENSCO</u>
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation Street <u>American Oil Road</u> City <u>El Dorado</u> State <u>A R</u> Zip <u>7 1 7 3 0</u>

Site 5	A. EPA ID No. of off-site installation or transporter <u>C A T 0 0 0 6 1 2 1 5 0</u>	B. Name of off-site installation or transporter <u>Englehard West, Inc.</u>
	C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation Street <u>5510 East La Palma Ave.</u> City <u>Anaheim</u> State <u>C A</u> Zip <u>9 2 8 0 7</u>

Comments: \* Site 2 = Site 3 Name changed from ARR to PFM.



# SPARTON

## SPARTON TECHNOLOGY

### CERTIFIED MAIL-RETURN RECEIPT REQUESTED

March 19, 1996

Ms. Anna Walker  
New Mexico Environment Department  
P.O. Box 26110  
2044 Galisteo Dr.  
Santa Fe, New Mexico 87505

*fw  
Rec'd  
4/21/96*

Dear Ms Walker:

Thank you for granting Sparton Technology, Inc. an extension to submit our 1995 Biennial Hazardous Waste Report.

Enclosed are 3 attachments.

Attachment 1 contains one each Form GM and Form PS 1993 versions. This is an addendum to our March 24, 1994 submittal and reports the amount of ground water treated on site via airstripping. Due to an oversight on our part this was not reported in our 1993 Biennial Hazardous Waste Report.

Attachment 2 reports the status of Sparton Technology's two other facilities; Rio Rancho which is a Small Quantity Generator and Deming Electronics which is a Conditionally Exempt Small Quantity Generator.

Attachment 3 reports hazardous waste activity associated with our Coors Road Facility. Forms IC, OI, GM and PS totaling 14 pages are included. Form OI reports all transporters and off site TSD facilities utilized in 1994 and 1995. Form GM page 6 of 14 reports the last on site Perma-Fix treatment process conducted on February 28, 1995 for this facility. Subsequent to that the Coors Road Facility is a Conditionally Exempt Small Quantity Generator.

If you have any questions please contact John Wakefield or me at (505) 892-5300. Thank you for your attention to this matter.

Sincerely,  
SPARTON TECHNOLOGY, INC.

*RD Mico*  
Richard D. Mico  
Vice President and General Manager

Attachments:

cc: Mr. Jan Appel  
Mr. John Wakefield

**ATTACHMENT 1**



U.S. ENVIRONMENTAL PROTECTION AGENCY

1993 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT



BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:  
 SITE NAME: Sparton Technology, Inc.  
Coors Road Facility  
 EPA ID NO: N M D 0 8 3 2 1 2 3 3 2

INSTRUCTIONS: Read the detailed instructions beginning on page 18 of the 1993 Hazardous Waste Report booklet before completing this form.

**Sec. I** A. Waste description - Instruction page 18.  
Groundwater contaminated by a RCRA hazardous waste leachate

B. EPA hazardous waste code Page 19.  
F 0 0 1 F 0 0 2  
D 0 4 0 D 0 0 7 \_\_\_\_\_

C. State hazardous waste code Page 19.  
 \_\_\_\_\_

D. SIC code Page 19. 3 6 9 9  
 E. Origin code 2\* Page 19 System Type LM \_\_\_\_\_  
 F. Source code Page 20. A 6 9  
 G. Point of measurement Page 20. 1  
 H. Form code Page 20. B 1 1 4\*  
 I. RCRA - radioactive mixed Page 20. 2

**Sec. II** A. Quantity generated in 1982 Instruction Page 21. \_\_\_\_\_ NA\*  
 B. Quantity generated in 1983 Page 21. \_\_\_\_\_ NA\*  
 C. UOM Page 21. 5 Density 1.00  
 1 lbs/gal  2 sg  
 D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.  
 1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (SKIP TO SEC. III)

**ON-SITE PROCESS SYSTEM 1**  
 On-site process system type Page 22. LM 0 8 3  
 Quantity treated, disposed, or recycled on site in 1993 3 7 9 0 0 0 . 0

**ON-SITE PROCESS SYSTEM 2**  
 On-site process system type Page 22. \_\_\_\_\_  
 Quantity treated, disposed, or recycled on site in 1993 \_\_\_\_\_

**Sec. III** A. Was any of this waste shipped off-site in 1993  1 Yes (CONTINUE TO BOX B)  
 2 No (SKIP TO SEC. IV)  
 Instruction page 23.

Site 1	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>LM</u> _____	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1993 Page 23. _____
Site 2	B. EPA ID No. of facility waste was shipped to Page 23. _____	C. System type shipped to Page 23. <u>LM</u> _____	D. Off-site availability code Page 23. _____	E. Total quantity shipped in 1993 Page 23. _____

**Sec. IV** A. Did new activities in 1993 result in minimization of this waste?  1 Yes (CONTINUE TO SYSTEM 1)  
 2 No (THIS FORM IS COMPLETE)  
 Instruction page 24.

B. Activity Page 24. W \_\_\_\_\_ W \_\_\_\_\_  
W \_\_\_\_\_ W \_\_\_\_\_

C. Other effects Page 24.  1 Yes  2 No

D. Quantity recycled in 1993 due to new activities Page 25. \_\_\_\_\_

E. Activity/production index Page 25. \_\_\_\_\_

F. 1993 source reduction quantity Page 26. \_\_\_\_\_

Comments: Sec. I E, Origin Code = Other remedial cleanup activity  
 Sec. I H, Form Code = Contaminated Groundwater  
 Sec. II, A and B. NA as per instructions pg. 46 of 1995 Hazardous Waste Report Instructions and Forms

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME: Sparton Technology, Inc.  
Coors Road Facility

EPA ID NO: N M D 0 8 3 2 1 2 3 3 2



U.S. ENVIRONMENTAL PROTECTION AGENCY

1993 Hazardous Waste Report

FORM PS

WASTE TREATMENT, DISPOSAL, OR RECYCLING PROCESS SYSTEMS

INSTRUCTIONS: Read the detailed instructions beginning on page 33 of the 1993 Hazardous Waste Report booklet before completing this form.

Sec. I

A. Waste treatment, disposal, or recycling system description

Instruction Page 38.

Airstripping of contaminated ground water.

B. System type  
Page 38.

M 0 8 3

C. Regulatory status  
Page 38.

1 0

D. Operational status  
Page 38.

0 1

E. Unit types  
Page 38.

0 1 1 0 \*

Sec. II

A. 1993 influent quantity

Instruction page 40.

Total 3 7 9 0 0 0 0 UOM 5

RCRA 0 3

Density 1 0 0

1 lbs/gal  2 sg

B. Maximum operational capacity

Page 41.

Total 6 6 6 6 0 0 0

RCRA 2 8 4 6

C. 1993 liquid effluent quantity

Instruction page 42.

Total 3 7 9 0 0 0 0 UOM 5

RCRA 0 0

Density 1 0 0

1 lbs/gal  2 sg

D. 1993 solid/sludge residual quantity

Page 42.

Total 0 0 UOM      Density     

RCRA 0 0  1 lbs/gal  2 sg

E. Limitation on maximum operational capacity

Page 43.

1. 0 1 2. 0 7 3. 0 8

F. Commercial capacity availability code

Page 43.

NA

G. Percent capacity commercially available

Page 43.

     %

Comments:

- \*Sec. I E, Unit types. Other; ground water production wells to double containment HDPE pipe to 550 gal. collection tank to airstripper to 15,000 gal. storage tank to facility process water to sewer system.
- \*Sec. II, B Historical maximum capacity achieved.
- Sec. II E Other limitations on capacity, ground water production from wells.