

Department of Energy/

Carlsbad Field Office P. O. Box 3090 Carlsbad, New Mexico 88221

JAN 15 2004

Ms. Linda Montoya Hazardous Waste Bureau **New Mexico Environment Department** 2905 Rodeo Park Drive East, Building 1 Santa Fe, NM 87505-6303



Currently Owned or Operated Federal Facilities Report

Dear Ms. Montoya:

In accordance with Section 3016 of the Resource Conservation and Recovery Act (RCRA), please find the enclosed 2004 Inventory of Federal Hazardous Waste Activities at Currently Owned or Operated Federal Facilities report for the Waste Isolation Pilot Plant near Carlsbad.

If you have any questions regarding the Section 3016 Inventory Report, please contact Mr. Jody Plum at (505) 234-7462 or Ms. K. S. Guillermo at (505) 234-8753.

Sincerely,

Enclosure

cc: w/o enclosure

J. Antizzo, DOE-HQ

J. Plum, CBFO

S. Zappe, NMED

K. Guillermo, WRES

CBFO M&RC

U.S. EPA 2004 INVENIORY OF FEDERAL HAZARDOUS ASTE ACTIVITIES AT CURRENTLY OWNED OR OPERATED FEDERAL FACILITIES

Complete this form for each Federally owned or operated facility

This form applies to all Federal hazardous waste facilities which are currently owned or operated by the Government. A

"Federally owned or operated facility" or "facility" is defined as all the contiguous property owned and/or operated by a Federal agency at any one location and at which hazardous waste is stored, treated, or disposed, or has been disposed. The boundary of the Federal facility is the perimeter of the contiguous property owned or operated by the Federal agency irrespective of the boundary of any CERCLA sites or RCRA facilities located on the property.			
A. FEDERALLY OWNED OR OPERATED FACILITY IDENTIFICATION			
1. Facility name: WASTE ISOLATION PILOT PLANT			
2. Federal Facility Identification Number: OA-000000004			
3. RCRA ID number (if applicable): NM4890139088			
B. RESPONSIBLE FEDERAL AGENCY			
1. Facility owner			
Department: DEPARTMENT OF ENERGY			
Agency/Bureau: CARLSBAD FIELD OFFICE			
Contractor: N/A			
Other: N/A			
2. Facility operator (if different from owner)			
Department: DEPARTMENT OF ENERGY			
Agency/Bureau: CARLSBAD FIELD OFFICE			
Contractor: WASHINGTON TRU SOLUTIONS			
Other: N/A			
3. Facility type (check ONE)			
GOGO X GOCO GOPO POGO Lessee			
Foreclosure Trespass Withdrawal Forfeiture			
C. LOCATION OF FEDERALLY OWNED OR OPERATED FACILITY	-		
1.a. Facility location address			
Address 32 MILES SOUTHEAST OF CARLSBAD ON THE JAL HIGHWAY			
City CARLSBAD State NM Zip 88220			
1.b. If no street address, provide county or township and state in which the facility is located.			
County/Township EDDY State NM			
2. Latitude and longitude of facility in degrees			
Latitude 032d22m30s Longitude 103d47m30s			

AT CURRENTLY OWNED OR OPERATED FEDERAL FACILITIES			
Complete this form for each Federally owned or operated facility			
Facility name: WASTE ISOLATION PILOT PLANT			
Federal Facility Identification Number: OA-00000004			
3. Facility mailing address			
Address P.O. BOX 2078			
City CARLSBAD State NM Zip 88221-2078			
D. CONTACT INFORMATION			
Name, title, and telephone number of person completing this form			
Name: K. S. GUILLERMO			
Title: REGULATORY ASSURANCE SPECIALIST			
Phone: 505-234-8753			
E. FACILITY HAZARDOUS WASTE INFORMATION			
Is/was environmental monitoring conducted at the facility? X Yes No			
Has hydrogeologic site characterization been conducted at the facility? X Yes No In Progress Do Not Know			
Have there been any releases of hazardous substances to the environment at the facility? Yes X No			
4. Have corrective actions been initiated at this facility under RCRA authority? X Yes No			
 Is this facility currently, or has this facility ever treated, stored, or disposed of hazardous waste under RCRA authority? (Answer only if the facility received hazardous waste on or after November 19, 1980.) 			
X Yes No			
6. Are there any areas at this facility being addressed under CERCLA authority? (Answer only if the facility has disposed of hazardous substances.)			
YesX No			
7. If Yes to 6, are any areas of this facility listed or proposed on the NPL? Yes No			
F. PRELIMINARY ASSESSMENT (PA)/SITE INVESTIGATION (SI) INFORMATION			
1. Has a PA been conducted at this facility?			
2. If Yes, has the PA been submitted to EPA? Yes No Date submitted:			
3. Has an SI been conducted at this facility? Yes In Progress			
4. If Yes, has the SI been submitted to EPA? Yes No Date submitted:			

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	OR OPERATED FACILITY IDENTIFICATION		
1. Facility name: V	VASTE ISOLATION PILOT PLANT		
2. Federal Facility Ide	entification Number: OA-00000004		
3. RCRA ID number ((if applicable): NM4890139088		
B. RESPONSIBLE FEDE	RAL AGENCY		
1. Facility owner			
Department:	DEPARTMENT OF ENERGY		
Agency/Bureau:	CARLSBAD FIELD OFFICE		
Contractor:	N/A		
Other:	N/A		
2. Facility operator (i	f different from owner)		
Department:	DEPARTMENT OF ENERGY		
Agency/Bureau:	CARLSBAD FIELD OFFICE		
Contractor:	WASHINGTON TRU SOLUTIONS		
Other:	N/A		
3. Facility type (checonomic GOGO Foreclos	X GOCO GOPO POGO Lessee		
C. LOCATION OF FEDERALLY OWNED OR OPERATED FACILITY			
1.a. Facility location a	iddress		
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City CARLSBAD State NM Zip 88220			
1.b. If no street address, provide county or township and state in which the facility is located.			
County/Township EDDY State NM			
Latitude and longitude of facility in degrees Latitude 032d22m30s			

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Complete this form for each Federally owned or operated facility			
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3. Facility mailing address			
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City CARLSBAD State NM Zip 88221-2078			
D. CONTACT INFORMATION Name, title, and telephone number of person completing this form			
Name: K. S. GUILLERMO			
Title: REGULATORY ASSURANCE SPECIALIST			
Phone: 505-234-8753			
E. FACILITY HAZARDOUS WASTE INFORMATION 1. Is/was environmental monitoring conducted at the facility? X Yes			
F. PRELIMINARY ASSESSMENT (PA)/SITE INVESTIGATION (SI) INFORMATION			
1. Has a PA been conducted at this facility? Yes X No In Progress			
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