

Periodic Methane Monitoring Report

Oct-Dec 2024

Quarter or Month / Year

Facility Name:	ATLANTA - GUN CLUB RD (SL)	Monitoring Conducted by:	Timothy Colbert
Facility Permit #'s:	060-026D (SL)		
County (Location):	Fulton	Equipment Field Calibrated by:	Timothy Colbert
Date(s) of Monitoring:	12/26/2024	Date of Field Calibration:	12/26/2024
Monitoring Equipment:	Landtec Gem-5000 NAV	Manufacturer Calibration/Service Date:	06/26/2024

1. All reports must include a scaled and dated potentiometric surface map, (this applies only to those facilities required to perform groundwater monitoring) that shows ALL monitoring points, accompanied by a table listing the as-built depths and corresponding elevations of the bottoms of the methane monitoring wells and/or barhole punches. The potentiometric surface maps must be updated on an annual basis, signed & sealed by a qualified groundwater scientist. Those facilities that do not conduct groundwater monitoring should, at a minimum, include a site map that shows ALL monitoring locations.
2. All reports must specify whether each monitoring location is a structure, permanent well, barhole punch or vent (e.g. MM-1=scalehouse, MM-1=well, MM-1=BHP (barhole punch), MM-1=vent, or GWC-1=groundwater well).

3. Monitoring Results

a. Permanent Approved COMPLIANCE Monitoring Locations

<u>Monitoring Point</u>			<u>Monitoring Point</u>		
<u>Identification</u>	<u>Monitoring Results</u>		<u>Identification</u>	<u>Monitoring Results</u>	
MM-3R	% Methane By Volume:	0%	MM-4R	% Methane By Volume:	0%
Methane Well	% Oxygen:	17.4%	Methane Well	% Oxygen:	14.6%
	Time Sampled:	12 : 30		Time Sampled:	12 : 35
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-5R	% Methane By Volume:	0%	MM-6R	% Methane By Volume:	0%
Methane Well	% Oxygen:	19.4%	Methane Well	% Oxygen:	17.3%
	Time Sampled:	12 : 39		Time Sampled:	12 : 51
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-7D	% Methane By Volume:	0%	MM-7s	% Methane By Volume:	0%
Methane Well	% Oxygen:	19.6%	Methane Well	% Oxygen:	18.9%
	Time Sampled:	12 : 57		Time Sampled:	13 : 00
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-8R	% Methane By Volume:	0%	MM-9RR	% Methane By Volume:	0%
Methane Well	% Oxygen:	18.3%	Methane Well	% Oxygen:	16.6%
	Time Sampled:	13 : 05		Time Sampled:	13 : 11
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-8A	% Methane By Volume:	0%	MM-12	% Methane By Volume:	0%
Methane Well	% Oxygen:	13.1%	Methane Well	% Oxygen:	12.4%
	Time Sampled:	13 : 17		Time Sampled:	13 : 21
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024

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<u>Identification</u>	<u>Monitoring Results</u>		<u>Identification</u>	<u>Monitoring Results</u>	
MM-13 Methane Well	% Methane By Volume:	0%	MM-14 Methane Well	% Methane By Volume:	0%
	% Oxygen:	11.3%		% Oxygen:	14.5%
	Time Sampled:	13 : 26		Time Sampled:	13 : 31
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-15 Methane Well	% Methane By Volume:	0%	MM-12 Methane Well	% Methane By Volume:	0%
	% Oxygen:	13.9%		% Oxygen:	12.3%
	Time Sampled:	13 : 36		Time Sampled:	13 : 43
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-16 Methane Well	% Methane By Volume:	0%	MM-17 Methane Well	% Methane By Volume:	0%
	% Oxygen:	13.2%		% Oxygen:	15.2%
	Time Sampled:	13 : 50		Time Sampled:	14 : 01
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-10 Methane Well	% Methane By Volume:	0%	MM-18 Methane Well	% Methane By Volume:	0%
	% Oxygen:	15.7%		% Oxygen:	12.2%
	Time Sampled:	14 : 15		Time Sampled:	14 : 33
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024
MM-01 Methane Well	% Methane By Volume:	0%	MM-02 Methane Well	% Methane By Volume:	0%
	% Oxygen:	13.5%		% Oxygen:	14.9%
	Time Sampled:	14 : 45		Time Sampled:	14 : 54
	Date Sampled:	12/26/2024		Date Sampled:	12/26/2024

b. Facility Structures (All on-site structures must be monitored, listed, and shown on map)

<u>Facility Structure</u>	<u>Monitoring Results</u>	<u>Facility Structure</u>	<u>Monitoring Results</u>
Flare House		Site Office	
% LEL:	0%	% LEL:	0%
% Methane by Volume:	0%	% Methane by Volume:	0%
% Oxygen:	20.5%	% Oxygen:	20.9%
Time Sampled:	12 : 45	Time Sampled:	15 : 26
Date Sampled:	12/26/2024	Date Sampled:	12/26/2024
% LEL:		% LEL:	
% Methane by Volume:		% Methane by Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	
% LEL:		% LEL:	
% Methane by Volume:		% Methane by Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	

c. Miscellaneous Monitoring Locations (vents, trenches not part of compliance monitoring)

<u>Monitoring Point</u>	<u>Monitoring Results</u>	<u>Monitoring Point</u>	<u>Monitoring Results</u>
<u>Identification</u>		<u>Identification</u>	
% Methane By Volume:		% Methane By Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	
% Methane By Volume:		% Methane By Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	
% Methane By Volume:		% Methane By Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	
% Methane By Volume:		% Methane By Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	
% Methane By Volume:		% Methane By Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	
% Methane By Volume:		% Methane By Volume:	
% Oxygen:		% Oxygen:	
Time Sampled:		Time Sampled:	
Date Sampled:		Date Sampled:	

d. Adjacent Off-site Structures (offsite structures at facilities with known release)

Off-site Structure	Monitoring Results	Off-site Structure	Monitoring Results
	% LEL:		% LEL:
	% Methane by Volume:		% Methane by Volume:
	% Oxygen:		% Oxygen:
	Time Sampled:		Time Sampled:
	Date Sampled:		Date Sampled:
	% LEL:		% LEL:
	% Methane by Volume:		% Methane by Volume:
	% Oxygen:		% Oxygen:
	Time Sampled:		Time Sampled:
	Date Sampled:		Date Sampled:

4. Climatic/Physical Conditions at Site

Samples must be collected under normal/average conditions of temperature, pressure, and climate for the season. Barhole punch sampling should not be performed during or immediately after rain events, or when soils are saturated or frozen. **All sampling at compliance monitoring locations must be performed after 12:00 pm, and completed by 6:00 pm.** Barometric information can be obtained from many locations.

(i.e. <http://weather.noaa.gov>)

a. Soil Conditions: Moist.

b. Weather Conditions: Partly Sunny.

c. Temperature: 50

d. Barometric Conditions: Rising Falling Steady ✓ Reading 30.23

e. Relative Humidity 10%-90%? Yes ✓ No Range:

f. Condition/Access: Sampling points are properly identified, secured and maintained?
Yes ✓ No

If no please list deficiencies observed:

g. If stressed vegetation due to the presence of methane gas is noted, describe the extent and location in the space provided below.

None.

5. Description of Sampling Techniques: Provide a clear and concise description for each type of sampling (well, barhole punch, structure, etc.) performed during the monitoring event. Wells are **NOT** to be vented, peak readings should be reported. Any exceptions should be noted here.

The wells casings are not vented and, wells are not vented prior to sampling. Wells are uncapped immediately prior to sampling and recapped immediately after sampling. During sampling a direct connection is maintain between the sampling instrument and the well, preventing intrusion of atmospheric air.

6. Additional Comments

CERTIFICATION

I CERTIFY that all required information on this form is complete and accurate, and

I further CERTIFY that methane sampling was conducted by myself or my authorized representative in accordance with all applicable rules and current EPD guidance. Concentrations of methane detected during this sampling/monitoring event **do** / ✓ **do not** exceed 25 percent of the lower explosive limit (LEL) for methane in facility structures (excluding the gas recovery system components) and gas concentrations **do** / ✓ **do not** exceed the LEL for methane at the approved compliance monitoring locations.

(IF THIS STATEMENT IS NOT SIGNED OR THE FORM IS ALTERED THE DIVISION WILL NOT ACCEPT THE RESULTS FROM THE SUBJECT FACILITY)

(Signature)

(Title)

(Date)

(Typed Name, Address, and Telephone Number)